## HU8000032225

(Requestor's Name)
(Address)
(Address)
(180,000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Pory Sadler (Name of Limited)	146		
(Name of Limited Liability Company)			
The enclosed Articles of Dissolution and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Rory Sadle	(CDurana)		
,			
Rovy Sadler LLC (Firm/Company)			
674 Kensing ton Place			
Wilton Mayors FL 33305			
For further information concerning this matter, please call:			
Kory Sadler	at (864) 274-1655 (Area Code & Daytime Telephone Number)		
(Name of Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:			
\$25.00 Filing Fee and Certificate of Dissolution	S55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)		
Mailing Address:	Street Address:		
Registration Section Division of Corporations	Registration Section Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		
rananassee, i L Jajir	Tallahassee, FL 32303		

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. 25	
1. The name of a limited liability company is	
Rory Sadler, LLC	<u></u> .
/ - ' ' 3	
2. The Articles of Organization were filed on and	id assigned
	_
document number <u>L08000032225</u>	
3. The delayed effective date the dissolution if not effective on the date of filing:  (effective date cannot be prior to or more than 90 days later than date docu  Note: If the date inserted in this block does not meet the applicable statutory filing requ listed as the document's effective date on the Department of State's records.	ment is received for filing) irements, this date will not be
4. A description of occurrence that resulted in the limited liability company's dissol 605.0707. Florida Statutes, (copy 605.0707 on back cover letter).	ution pursuant to section
Moving out it state	
	1921 A.L.
	<del>                                      </del>
	<del></del>
	<del></del>
5. If there are no members, enter the name and address of the person appointed to w	ind up the company's
activities and affairs: Rory Sadler	
\\ \(\frac{1}{2} \)	
activities and affairs:  Rory Sadler  1717 NF 17 <sup>th</sup>	Terr.
Fort Lauderdale,	FL
,	
	133305
<ol> <li>Signature of an authorized person or if there are no members, the signature of the above to wind up the company's activities and affairs:</li> </ol>	person appointed and listed
land falls King	Sheller
Signature Printed Na	me
•	}

FILING FEE: \$25.00