L0800004/497

· (Req	uestor's Name)			
. (Add	ress)			
(Add	ress)			
(Cit)	/State/Zip/Phone			
(City	/State/Zip/Phone	∌#)		
PICK-UP	☐ WAIT	MAIL		
(Bus	iness Entity Nar	ne)		
·	·			
(Doc	ument Number)			
Certified Copies	Certificates	of Status		
Special Instructions to F	iling Officer:			
	Α ,			
A. LUNT				
	JUN -	8 2010		
\ <u>\</u>	Office Use On	INER		



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SECRETARY OF STATE

UN JUN -7 PM 2: 09



May 20, 2010

ROBERT CLANCEY 401 OSPREY LANDING WAY LAKELAND, FL 33813

SUBJECT: R E. CLANCEY, LLC Ref. Number: L08000041497

We have received your document for R E. CLANCEY, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Letter Number: 410A00012767

Agnes Lunt Regulatory Specialist II

www.sunbiz.org

COVER LETTER

	ration Section on of Corporations				
SUBJECT.	'RE /	Chancer LLC			
SUBJECT:	(Name of Li	mited Liability Company)			
The enclosed A	rticles of Dissolution and fee(s) are sub	emitted for filing.			
Please return al	correspondence concerning this matter	r to the following:			
	Rober	it Claucey			
	. (Name of Person)			
	RE CI	lanceur LLC	72 23		
	401 01pe	1 Landing way			
		(* /			
	Lakeland	FL 33813			
	(City	/State and Zip Code)			
For further info	Division of Corporations RE LLANCE LLL (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: RE Clance LLL (Name of Person) RE Clance LLL (Firm/Confpany) 401 0 PC Land Say (Address) Latelant FL 33 813 (City/State and Zip Code) To further information concerning this matter, please call: Rot Clance Say (Address) Latelant FL 33 813 (City/State and Zip Code) To further information concerning this matter, please call: Rot Clance Say (Address) At (B63) 349 3404 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: [225.00 Filing Fee				
	Pol - Clara	213 894	3401		
	(Name of Person)	(Area Code & Daytime Teleph	one Number)		
\$25.00 Filing		Certified Copy (additional copy is enclosed) Cert	ificate of Status & ified Copy		
	MAILING ADDRESS:	STREET/COURIER	ADDRESS:		
<u> </u>					
·					
		Tallahassee, FL 32301			

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	RE C	lance	y LL	<u>_</u>	
2. The Articles of Organization were filed on		200	8	and as:	signed document number
3. The date the dissolution was approved:	March	- 30		·	7910 JU
4. A description of occurrence that resulted in t 608.441, Florida Statutes, (copy 608.441 on	back cover le	etter).			
company will stop					
					G
7. CHECK ONE: There are no suits pending against the OR- Adequate provision has been made the entered against it in any pending suits.	for the satisfa	•		ment, order	or decree which may be
ignatures of the members having the same percer	ntage of mem	ibership	interests i	necessary to	approve the dissolution
Signature				Printed	l Name
Kob ECky				Ribert	E Clansey
			 		
<u></u>					

FILING FEE: \$25.00