

LD 80 00061935

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

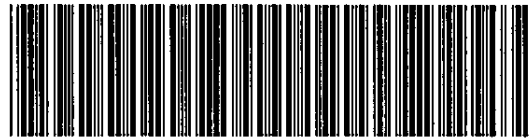
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800257355258

03/17/14--01011--018 **25.00

14 MAR 17 PM 10:03
SECURITY DIV
TALLAHASSEE, FLORIDA

1800hrs MAR 19 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CRAYTON ROAD HOUSE, LLC

(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:

JAMES F. CARNAVALLA

(Name of Person)

A&V DRYWALL, INC.

(Firm/Company)

7 PURDY STREET

(Address)

HARRISON, NY 10582

(City/State and Zip Code)

For further information concerning this matter, please call:

JAMES F. CARNAVALLA

(Name of Person)

at (914) 835-4400

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

✓ \$25.00 Filing Fee and Certificate of Dissolution

— \$55.00 Filing Fee, Certificate of Dissolution &
Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

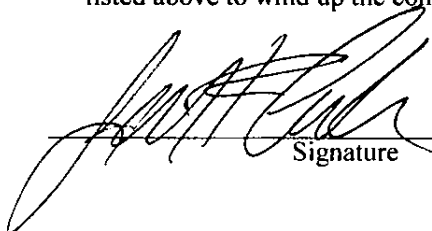
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
CRAYTON ROAD HOUSE, LLC
2. The Articles of Organization were filed on _____ and assigned
document number _____
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 document is received for filing)
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
THE COMPANY HAS CEASED PERFORMING OPERATIONS IN THE STATE
OF FLORIDA.
5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: JAMES F. CARNAVALLA
85 PARSONAGE ROAD
STAMFORD, CT 06903
6. Signature of an authorized person or if there are no members, the signature of the person appointed and
listed above to wind up the company's activities and affairs:


Signature

JAMES F. CARNAVALLA
Printed Name

FILING FEE: \$25.00

FILED
JAN 17 2017
CLERK OF COURT
JAN 17 2017
JAN 17 2017