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2016 JUL 20 AM 11: 11

K.SALY EXAMINER JUL 21

COVER LETTER

Division of Corporations					
SUBJECT: 565 HOUSE SITING					
(Name of Limited Liability Company)					
The enclosed Articles of Dissolution and fee(a) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
MATTHEW SALLETT (Name of Person)					
(Name of Person)					
SES HOUSE SITING					
(Lumcompany)					
BOYNTON BEACH FL 33472					
(Address)					
BOYNTON BEACH FL 33472					
(City/State and Zip Code)					
For further information concerning this matter, please call:					
MATT SAPLETT (561) 740 1354					
(Name of Person) (Area Code & Daytime Telephone Number)					
Enclosed is a check for the following amount:					
S \$25.00 Filing Fee and Certificate of Dissolution S \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)					
MAILING ADDRESS: STREET/COURIER ADDRESS:					

Registration Section
Division of Corporations
P.O. Box 6327

TO: Registration Section

Tailahassee, FL 32314

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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

· ,	ARTICLES OF DIS FOR A LIMITED LIABILIT		F/	LED
1. The name of a limited liabil	House SIT	TW6	2016 JUL 20 TALLAHASSEE and assigned	_
2. The Articles of Organization	were filed on 1/2 4	-\2008	and assigned	FLORIDA
document number	80000 714H	9		
3. The delayed effective date to (effective Notes: If the date inserted in the listed as the document's effective date to the docume	he dissolution if not effective date cannot be prior to or more the his block does not meet the applive date on the Department of	speake stational mind to	MARCH 3) 2016 ocument is received for filing) quirements, this date will no	C COSED.
4. A description of occurrence 605.0707, Florida Statutes, (copy 605,0707 on back cov	liability company's dis er letter).		ion
5. If there are no members, en activities and affairs:	er the name and address of		o wind up the company's	I
6 Signature of an authorized	anno or if there are no	where the gianature of	the nervon consisted on	
6. Signature of an authorized plisted above to wind up the cor	person of 11 uncreare no menon menor of the person of 11 uncreases and affair of the person of the person of 11 uncreares are no menor of the person of 11 uncreares are no menor of the person of 11 uncreares are no men	nders, une signature di s:	rue berson abbouncer and	Ā
Don Sen	ul .		SARRETT.	_
Signature		Printed	Name	

FILING FEE: \$25.00