

Lcf000094287

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

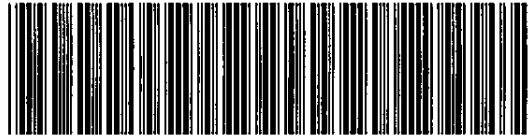
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04/27/15--01029--015 \*\*25.00

FILED  
15 APR 27 AM 7:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 APR 27 MAY 01 2015

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** THE AUER 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:

WALTER AUER

(Name of Person)

THE AUER LLC

(Firm/Company)

15846 PLACID POINT DR

(Address)

N FT MYERS, FL. 33917

(City/State and Zip Code)

For further information concerning this matter, please call:

WALTER AUER

(Name of Person)

239

878-2383

at ( )

(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

THE AUER LLC

2. The Articles of Organization were filed on 10/04/2008 and assigned

document number L08000094287

3. The delayed effective date the dissolution is 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).

SOLD THE BUSINESS

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: WALTER AUER

15846 PLACID POINT DR

N FT MYERS, FL. 33917

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:

Walter Auer  
Signature

WALTER AUER

Printed Name

**FILING FEE: \$25.00**

FILED  
15 APR 27 AM 7:55  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA