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COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

SUBJECT: PALM COAST SECU (Name of Limited Liabi	RITY SERVICES, LLC			
(Name of Limited Liabi	lity Company)			
The enclosed Articles of Dissolution and fee(s) are submitted for f	äling.			
Please return all correspondence concerning this matter to the following	owing:			
Norman R.	MUGFORD			
(Name of Per	son)			
(Firm/Compa	iny)			
Pa 3 . 3	SSE F I			
7.0.20x 2	50189			
P.O. Box 3 (Address) FALM COLST, F	50/89 EFF STATE OF ST			
TALM (of ST, (City/State and Zi				
(City/State und 2)	p couc)			
For further information concerning this matter, please call:				
1/2 Mine	201 1/11 70-1			
Norm Nogford at	(386) 445 - 7936 (Area Code & Daytime Telephone Number)			
(Paris of Person)	(rata code & Sayanie Polephore Planter)			
Enclosed is a check for the following amount:				
Certificate of Status Cer	0 Filing Fee & S60.00 Filing Fee, tified Copy ditional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
MAILING ADDRESS:	STREET/COURIER ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. T	he name of a limited lia	bility company is	SECULES	TU Scou	11CF 5 1	1.0
3. Th	LOBOO 103 5 de date the dissolution was description of occurrence	on were filed on 5 5 5 as approved:	1/15/20	008 a	and assigned docu	ament number
608	8.441, Florida Statutes, (• •	ack cover letter).	, y		PH 1: 10
6. All	l remaining property and this and interests. HECK ONE: There are no suits OR-	n has been made for assets have been of pending against the n has been made for	or the debts, oblig distributed among e company in any	ations and liabiliti its members in ac court.	ies pursuant to s.	608.4421.
	Signature Signature Mugg	11		Р	rinted Name	FORD

FILING FEE: \$25.00