LU8000104643

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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	Cogswell & Company, LLC		
Sobolet.	(Name of Limit	ed Liability Company)	
The enclosed	d Articles of Dissolution and fee(s) are submit	ted for filing.	
	all correspondence concerning this matter to	•	
	Robert A. Marshall		
	(Name of Person) Robert A. Marshall, PLC		
	Robert A. Marshall, PLC		
(Firm/Company)		m/Company)	
	4965 U.S. Highway 42, Suite 1000		
(Address)		(Address)	
	Louisville, KY 40222		
	(City/Sta	ate and Zip Code)	
For further in	nformation concerning this matter, please call	:	
Ro	bert A. Marshall	502 744-4410 at ()	
	(Name of Person)	(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)	
Re Div P.C	illing Address: gistration Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is Cogswell & Company, LLC
2.	The Articles of Organization were filed on November 7, 2008 and assigned
	document number L08000104643
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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
4. <i>i</i>	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 sole member of Cogswell & Company, LLC ("Company") passed a resolution
	to dissolve the Company effective immediately.
	<u> </u>
•	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
ó. ib	Signature of an authorized person or if there are no members, the signature of the person appointed and liste ove to wind up the company's activities and affairs:
10	Marie M. Cogswell
_	Signature Printed Name
	FILING FEE: \$25.00