108000115973

(Re	equestor's Name)	
(Ad	Idress)	
(Ad	ldress)	
(Cid	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	e)
(Dc	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
,		
i		

Office Use Only



800326013488

05/15/19 --000/75 --066 --++25.66

AHD155

MAR 2 6 2019 I ALBRITTON

COVER LETTER

TO: Registration Section

Division of Corporations

GRIZZZZLEE, L.L.C.

(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:

SHAWN BARROW

(Name of Person)

FAMLEE INVESTMENT COMPANY

(Firm/Company)

6509 HAZELTINE NATIONAL DR STE6

(Address)

ORLANDO, FLORIDA 32822

(City/State and Zip Code)

For further information concerning this matter, please call:

SHAWN BARROW

(Name of Person)

 $at (\frac{407}{\text{(Area Code & Daytime Telephone Number)}})$

Enclosed is a check for the following amount:

■ \$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

	A LIMITED LIABILI	TY COMPANY
The name of a limited GRIZZZZLEE, L.L.C.	liability company is	TY COMPANY 70/9/1/3: 15
The Articles of Organi	ization were filed on 12/22/2008	and assigned
document number L08	3000115973	
Note: If the date inserte	rective date cannot be prior to or more ti	ve on the date of filing:01/01/2019 han 90 days later than date document is received for filing plicable statutory filing requirements, this date will State's records.
605.0707, Florida Statu	rrence that resulted in the limited utes, (copy 605.0707 on back covered, COMPANY CLOSED.	liability company's dissolution pursuant to seer letter).
. If there are no member activities and affairs:	rs. enter the name and address of	the person appointed to wind up the company
	rs. enter the name and address of	the person appointed to wind up the company

FILING FEE: \$25.00

Printed Name

Signature