

LO9000007851

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

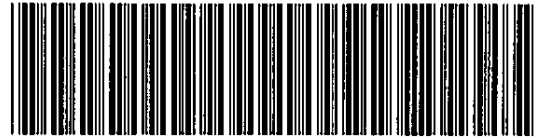
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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06/18/14--01008--024 **25.00

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TALLAHASSEE, FLORIDA
14 JUN 18 PM 10:00

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6/20

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: S&R Photography, 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:

BRIAN Smith
(Name of Person)

S&R Photography, LLC.
(Firm/Company)

1334 Powis RD.
(Address)

ST. AUGUSTINE FL. 32095
(City/State and Zip Code)

For further information concerning this matter, please call:

BRIAN Smith at (904) 704-6967
(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)

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
S & R Photography, LLC.
2. The Articles of Organization were filed on 6/14/14 and assigned
document number _____
3. The delayed effective date the dissolution if not effective on the date of filing: 6/30/14
(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).

No longer want to operate

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

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:


Signature

BRIAN Smith
Printed Name

FILING FEE: \$25.00

FILED
JUN 14 2014
TALLAHASSEE
FLORIDA
605.0707