

LD9000010558

(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:

Office Use Only



100268412531

01/20/15--01022--021 \*\*25.00

FILED  
2015 JAN 20 PM 4:06  
CLERK OF STATE  
TALLAHASSEE FLORIDA

JAN 30 2015  
J. BRUCE

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Rowlands PM 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:

Ken Arena, EA

(Name of Person)

Ken Arena Accounting & Tax Service

(Firm/Company)

912 Lithia Pinecrest Road

(Address)

Brandon, FL 33511-6121

(City/State and Zip Code)

For further information concerning this matter, please call:

Ken Arena

(Name of Person)

at (

813

341-2501

(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

FILED  
2015 JAN 20 PM 4:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Rowlands PM LLC

2. The Articles of Organization were filed on January 28, 2009 and assigned

document number L09000010558

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)

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).

Written consent of LLC member to dissolve limited liability company.

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

Andrew J. Rowlands

Printed Name

**FILING FEE: \$25.00**

**FILED**  
2015 JAN 20 PM 4:06  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA