(Ře	equestor's Name)	
(Ad	ldress)	
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(Cid	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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APR = 8 2014

T. BROWN

# **COVER LETTER**

Division of Corporations
SUBJECT: 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:
RISTINA MIERRIES (Name of Person)
NATANDEM LLC
(Firm/Company)
4000 AUSTRIAN ELVD
(Address)
City/State and Zip Code)
For further information concerning this matter, please call:
RISTINA M. DEVRIES at (PH), 456-3720
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:

# **MAILING ADDRESS:**

\$25.00 Filing Fee and Certificate of Dissolution

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

\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)



# FLORIDA DEPARTMENT OF STATE Division of Corporations

March 24, 2014

KRISTINA M DEVRIES 9060 AUSTRIAN BLVD PUNTA GORDA, FL 33982

SUBJECT: NATANDEM, LLC Ref. Number: L09000052243

We have received your document for NATANDEM, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 114A00006299

Teresa Brown Regulatory Specialist II

www.sunbiz.org

# ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

4	EFFECTIVE DATE	
ſ	ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY  AND OF THE STATE OF THE ST	
1. The name of a limited liabi	lity company is  -M LLC  -M LC  -M LC	
2. The Articles of Organization document number	on were filed on $11749 \times 13000$ and assigned $30000 \times 13000$	
3. The delayed effective date (effective	the dissolution if not effective on the date of filing:  date cannot be prior to or more than 90 days later than date document is received for filing)	
4. A description of occurrence 605.0707, Florida Statutes,  SAUF O  BY NA	e that resulted in the limited liability company's dissolution pursuant to section (copy 605.0707 on back cover letter).  FTHE PROPORTY OWNED  TANDEM, LLC	
5. If there are no members, er activities and affairs:	The name and address of the person appointed to wind up the company's  KRISTINA M. DEVRIES  9060 AUSTRIAN BLVD  PUNTA GORDA, FL 33980	
6. Signature of an authorized listed above to wind up the co	person or if there are no members, the signature of the person appointed and mpany's activities and affairs:    KRISTINA M. DEURIES	

**FILING FEE: \$25.00**