

LDAD000062831

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

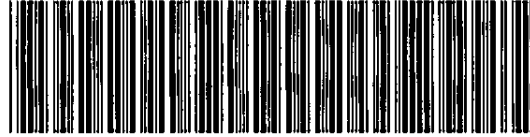
☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:



100267505531

12/22/14--01008--016 \*\*25.00

DEPT OF STATE  
TALLAHASSEE, FLORIDA

2014 DEC 22 PM 2:51

FILED

DEC 31 2014  
CLERK

Hilary Sessions  
2205 Windwood Place  
Valrico, FL 33596

Registration Section  
Division of Corporations  
Secretary of State  
PO Box 6327  
Tallahassee, FL 32314

SUBJECT: Hilary R Sessions Roth IRA #2690, LLC

Dear Sir:

The enclosed Articles of Dissolution and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Hilary Sessions  
Hilary Sessions Roth IRA #2690, LLC  
2205 Windwood Place  
Valrico, FL 33596

For further information concerning this matter, please call:

Hilary Sessions @ (813) 685-0468

Enclosed is a check for the \$25.00 filing fee and Certificate of Dissolution

2014 DEC 22 PM 2:51  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

HILARY SESSIER'S ROTH IRA #2690, LLC

2. The Articles of Organization were filed on 6/26/2009 and assigned

document number L09000062831

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).

I JUST RECEIVED THE K-1 WITH THE VALUE OF THE INVESTMENT  
OF \$0. FROM THE ACCOUNTANT FOR THE INVESTMENT

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

HILARY SESSIER'S  
2805 WINDWOOD AVE  
VALRUE, FL 33596

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

9/23/14  
Printed Name

FILING FEE: \$25.00

2014 DEC 22 PM 2:01  
CLERK OF STATE  
TALLAHASSEE, FLORIDA