

L09000100822

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2014 JAN 10 PM 1:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN 14 2013

T. HAMPTON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: BONE ISLAND GEAR COMPANY, 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:

J. CHARLES SHERMAN

(Name of Person)

(Firm/Company)

PO BOX 718

(Address)

BISBEE, AZ 85603

(City/State and Zip Code)

For further information concerning this matter, please call:

J. CHARLES SHERMAN

(Name of Person)

at ( 305 ) 393 1980

(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

BONE ISLAND GEAR COMPANY, LLC

2. The Articles of Organization were filed on 4/29/2011 and assigned  
document number LO900100822

3. The delayed effective date the dissolution if not effective on the date of 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).

Business Closed  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

J. CHARLES SHERMAN  
PO BOX 718  
BISBEE, AZ 85603  
\_\_\_\_\_

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  


Printed Name

J. CHARLES SHERMAN

**FILING FEE: \$25.00**

**FILED**  
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TALLAHASSEE, FLORIDA