## 100000114264

(Re	equestor's Name)			
(Ad	ldress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
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### **COVER LETTER**

FO: Registration Section Division of Corporations			
Namad Rentals, LLC UBJECT:			
	Limited Liability Company)		
The enclosed Articles of Dissolution and fee(s) are su	abmitted for filing.		
lease return all correspondence concerning this matt			
Birgitta Namad			
	(Name of Person)		
Namad Rentals, LLC			
	(Firm/Company)		
220 Lake Margaret Circle	220 Lake Margaret Circle		
	(Address)		
Mt Dora, Fl 32757			
(Ci	ity/State and Zip Code)		
or further information concerning this matter, please			
(Name of Person)	at ()  (Area Code & Daytime Telephone Number)		
nclosed 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:	Street Address:		
Registration Section Division of Corporations	Registration Section Division of Corporations		
P.O. Box 6327	The Centre of Tallahassee		
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

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### ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

<ol> <li>The name of a lin Namad Rentals, LI</li> </ol>	nited liability company is .C		
2. The Articles of O	rganization were filed on Novembe	r 30, 2009	and assigned
document numbe	r <u>1.0900011-426-4</u>	<del>-</del>	
Note: If the date	ctive date the dissolution if not effe (effective date cannot be prior to or mo inserted in this block does not meet the ment's effective date on the Departmen	re than 90 days later than da e applicable statutory filir	ite document is received for filing)
4. A description of 6 605.0707. Florida	occurrence that resulted in the limit Statutes, (copy 605.0707 on back of	ed liability company's cover letter).	dissolution pursuant to section
	rental property was sold.		
			<u> </u>
			. स्तु- स्तु-
			COEC FLOR
5. If there are no me	embers, enter the name and address tirs: Birgitta Namad	of the person appointe	
	220 Lake Margaret Circl	e	
	Mt. Dora, Fl 32757		
6. Signature of an ar above to wind up the	uthorized person or if there are no recompany's activities and affairs:	nembers, the signature	of the person appointed and liste
Right	L Nacceased	Birgitta Namad	
Si	ignature	Prin	ted Name

**FILING FEE: \$25.00**