

LO9000120369

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

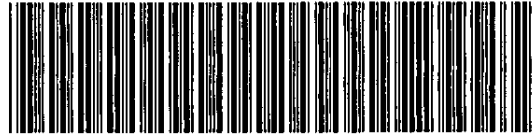
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



400295953824

02/27/17--01019--014 \*\*25.00

FILED  
CLERK OF STATE  
17 FEB 27 PM 1:28  
OFFICE OF CORPORATIONS

MAR 01 2017  
J. HARRIS

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** PILLET ASSOCIATES 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:

GENE PILLET

(Name of Person)

(Firm/Company)

11911 COLLINS AVENUE, APARTMENT 2905

(Address)

SUNNY ISLES, FLORIDA 33160

(City/State and Zip Code)

For further information concerning this matter, please call:

GENE PILLET

(Name of Person)

at 201 861 0033

(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  
PILLET ASSOCIATES LLC
2. The Articles of Organization were filed on 12/18/2009 and assigned  
document number L09000120369
3. The delayed effective date the dissolution if not effective on the date of filing: FEBRUARY 14, 2017  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be  
listed as the document's effective date on the Department of State's records.
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).  
COMPANY CEASED OPERATIONS ON 12/31/2016.
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: GENE PILLET  
1911 COLLINS AVENUE, APT 2905  
SUNNY ISLES, FL 33160
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:

FILED  
SECRETARY OF STATE  
1900 CORP. ORATION

17 FEB 27 PM 1:28

Signature

GENE PILLET

Printed Name \_\_\_\_\_

**FILING FEE: \$25.00**