

L100000024978

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(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

MAY 12 2014

J. BRUCI

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** NATIONAL ATHLETIC ASSOCIATION 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:

Dean Hohlman  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

2736 22nd ST/NO  
(Address)

ST PETERSBURG FL  
(City/State and Zip Code)

For further information concerning this matter, please call:

Dean Hohlman at (727) 822-9785  
(Name of Person) (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

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TALLAHASSEE, FLORIDA

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

NATIONAL ATHLETIC ASSOC. LLC

2. The Articles of Organization were filed on 3/5/2010 and assigned

document number L10000024978

3. The delayed effective date the dissolution is 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).

CONCEPT ONLY, NEVER EVER LEFT  
THE DRAWING TABLE, CONCEPT STAGE

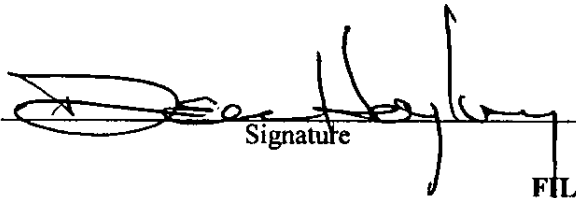
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

DEAN HOYLUNAN

2736 22nd ST/N

ST PETERS FL 33711

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

DEAN HOYLUNAN  
Printed Name

**FILING FEE: \$25.00**

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CLERK OF DISTRICT COURT  
ST. PETERS, FLORIDA