

L10000051273

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

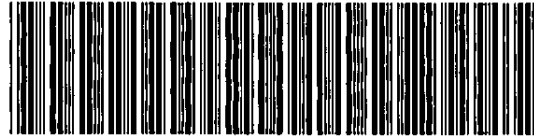
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status ☒

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TALLAHASSEE, FLORIDA

MAY - 1 2014

T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: T-W PAPPY, 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:

Virginia W Pappy
(Name of Person)

(Firm/Company)

P.O. Box 1134
(Address)

Ocala, FL 34478
(City/State and Zip Code)

For further information concerning this matter, please call:

Virginia W Pappy at (352) 266-7494
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 2, 2014

VIRGINIA W PAPY
PO BOX 1134
OCALA, FL 34478

SUBJECT: T&W PAPY, LLC
Ref. Number: L10000051273

Upon receipt of your letter and/or check(s) totaling \$30.00, no document was found. Please send your document with any fees due to:

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown
Regulatory Specialist II

Letter Number: 714A00007060

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

T & W PAPPY, LLC

2. The Articles of Organization were filed on 5-12-10 and assigned

document number L 10000051273

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).

lack of funds

Company was never organized

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

Virginia W Pappy

P.O. Box 1134

Ocala, FL 34478

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:

Virginia W. Pappy
Signature

Virginia W. Pappy
Printed Name

FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA