110000085590

(Re	equestor's Name)	,
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL.
(Bu	ısiness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
_		
NO DOC		

Office Use Only



300279564883

02/01/16--01039--024 **25.00

SECRETARY OF STATE ALLAHASSEE, FLORIO

K. SALY EXAMINER

FEB 16



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 3, 2016

ROBERT DELOSH RE: GLASS FAST, LLC 6402 SHOAL CREEK ST. CIR BRADENTON, FL 34202

SUBJECT: GLASS FAST, LLC Ref. Number: L10000085590 2016 FEB 16 AM 11: 41
SECRETARISEE FLORIDA

Upon receipt of your letter and/or check(s) totaling \$25.00, 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.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Karen A Saly Regulatory Specialist II

Letter Number: 116A00002340

COVER LETTER

	ition Section n of Corporations			
SUBJECT:	GLASS FA	d Liability Company)		
The enclosed Art	ticles of Dissolution and fee(s) are submitte	d for filing.		
Please return all	correspondence concerning this matter to th	ne following:		
	ROBERT	DE Cosh		
	GLASS FAST	Company)		
	6402 Short Com	wh so cit		
	_			
Bresser FC 34 202 (City/State and Zip Code)				
	(0.1), 0.111.	and Esp cour,		
	mation concerning this matter, please call:			
Ko	SENT DELOSH (Name of Person)	at (941) (Area Code & Daytin	779-8891	
	(ivalife of Person)	(Alea Code & Dayin	ne receptione realition,	
	k for the following amount:			
□ \$25.00 F	Filing Fee and Certificate of Dissolution	□ \$55.00 Filing Fee, Certified Copy (addition		

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

,	ARTICLES OF DISSOLUTION FOR
A	A THE EMPHONISH THE PROPERTY OF THE PARTY OF
The name of a limited liability	company is GLASS FAST CCC SLOS 16 PM 3: 14
The Articles of Organization v	were filed on 8-16-2010 and assigned AHASSIE FORTS
document number	10000085590
Note: If the date inserted in this	dissolution if not effective on the date of filing: /2-/5-/5 te cannot be prior to or more than 90 days later than date document is received for filing) block does not meet the applicable statutory filing requirements, this date will not be e date on the Department of State's records.
A description of occurrence th 605.0707, Florida Statutes, (co	nat resulted in the limited liability company's dissolution pursuant to section py 605.0707 on back cover letter).
SOLD The	Business
If there are no members, enter activities and affairs:	the name and address of the person appointed to wind up the company's
-	Barrandon R 34202
Signature of an authorized per ted above to wind up the comp	son or if there are no members, the signature of the person appointed and any's activities and affairs:
POC	Ribert De Lock

FILING FEE: \$25.00

Printed Name

Signature

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: 6485 KAST UC Document number of Limited Liability Company is: 410000 85520
Document number of Limited Liability Company is: 410000 85580
Date of dissolution was: 12-15-15
Description of information that must be included in a written claim:
Description of information that must be included in a written claim: SLO TLE Busiless
FOR BOOK
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Bob De Cush 6402 Shool Gran ST Ch Branch R 34202
6402 Shool Gran ST Ch
Broken R 34202

Printed Name of the Person Filing

claim is commenced within 4 years after the filing of this notice.

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00

A claim against the above named limited liability company will be barred unless a proceeding to enforce the