## L10000 117323

(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



200260877572

06/13/14--01005--013 \*\*25.00



## COVER LETTER

	Registration Section Division of Corporations	
SUBJEC	Criterion Security Group, LLC	
JOBOLC		ed Liability Company)
The encl	osed Articles of Dissolution and fee(s) are submitt	ed for filing.
Please re	turn all correspondence concerning this matter to	the following:
	Cindie A Unger	
	(Nan	ne of Person)
	Criterion Security Group, LLC	
	(Fire	n/Company)
	203 38th Avenue North	
	(	Address)
	St Petersburg, FL 33704	
	(City/Sta	te and Zip Code)
For furth	er information concerning this matter, please call:	
	Cindie a Unger	727 550-1085
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed	is a check for the following amount:	
1	\$25.00 Filing Fee and Certificate of Dissolution	<ul> <li>\$55.00 Filing Fee. Certificate of Dissolution &amp; Certified Copy (additional copy is enclosed)</li> </ul>
	MAILING ADDRESS:	STREET/COURIER ADDRESS:
	Registration Section Division of Corporations	Registration Section Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is  Criterion Security Group, LLC		
2.	The Articles of Organization were filed on November 9, 2010 and assigned		
	document number L10000117323		
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).		
	Conversion from LLC to corporation in Another STATE		
5.	If there are no members, enter the name and address of the person appointed to wind up the company's		
	activities and affairs:		
6. Iis	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:		
1	May 6. M/M Cindie A Unger		
<del>, - 6</del>	Signature Printed Name		

FILING FEE: \$25.00