

L11000006746

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Gathers APR 02 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALL SEASONS OUTDOOR CONCEPTS
(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:

GEORGE CRUZ
(Name of Person)

ALL SEASONS OUTDOOR CONCEPTS LLC.
(Firm/Company)

11023 COUNTRY HILL RD.
(Address)

CLERMONT FL. 34711
(City/State and Zip Code)

For further information concerning this matter, please call:

GEORGE CRUZ at (772) 529-3219
(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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

ALL SEASONS OUTDOOR CONCEPTS

2. The Articles of Organization were filed on 1-21-2011 and assigned

document number 211000006746

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).

SOLD ON 3-14-14

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: NONE

none

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

Printed Name _____

FILING FEE: \$25.00

SECRET
TALLAHASSEE, FLORIDA
14 MAR 28 AM 10:09
POINTED
LED