## LII 000009509

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(Address)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
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03/18/21--01010--004 \*\*35.00

2021 MAR 18 AM 7: 159

D. BRUCE

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: LECLYN Properties (Name of Limite	21 C ed Liability Company)
The enclosed Articles of Dissolution and fee(s) are submitted	ed for filing.
Please return all correspondence concerning this matter to t	the following:
LYN ATHERZON (Nam (Property) (Fire	of Person)
POBOX 67	Address)
Buffaco, Ky 427	e and Zip Code)
For further information concerning this matter, please call:	
LYN ATHERZON	at ( <u>270</u> ) <u>325 - 3319</u> (Area Code & Daytime Telephone Number).
	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:  X \$25.00 Filing Fee and Certificate of Dissolution	
Mailing Address: Registration Section Division of Corporations	Street Address: Registration Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited			
LEELYN TIZO	REPTIES LLC		
2. The Articles of Organi	ization were filed on/5/4	and ass	igned
document number	11000009509		
(ef <u>Note:</u> If the date insert	date the dissolution if not effecti fective date cannot be prior to or more t ed in this block does not meet the ap s effective date on the Department o	han 90 days later than date document i oplicable statutory filing requireme	s received for filing) nts, this date will not be
4. A description of occur 605.0707, Florida Statu	rence that resulted in the limited ites, (copy 605,0707 on back cov	liability company's dissolution er letter).	pursuant to section
	ATY OWNED BY H		
500000	12/15/20, Extec	TIVELY ENDING NE	to FOR
THIS CON	PANT.	——————————————————————————————————————	201
			TALL TALL
5. If there are no member activities and affairs:	rs, enter the name and address of	the person appointed to wind u	<u></u>
activities and arrans.			7:45
			η. · · · · · · · · · · · · · · · · · · ·
6. Signature of an author above to wind up the com	ized person or if there are no men pany's activities and affairs;	mbers, the signature of the person	on appointed and listed
, l.	2		
Signatu	<u></u>	LYNS. ATHER	TON
Signati	** *	i inned Name	

FILING FEE: \$25.00