

41000032866

(Requestor's Name)

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(Address)

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(Business Entity Name)

(Document Number)

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15 APR 16 PM 5:10
SECRETARY OF STATE
TALLAHASSEE, FL 32399

APR 27 2015

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SIR JOHN ENTERPRISE, "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:

JOHN D GRAY
(Name of Person)

(Firm/Company)

11829 Colyar Lane
(Address)

PARRISH FL 34219
(City/State and Zip Code)

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15 APR 16 PM 5:12
TALLAHASSEE, FL
STATE

For further information concerning this matter, please call:

~~John~~ John GRAY at (941) 524-1898
(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

SIR JOHN ENTERPRISE "LLC"

2. The Articles of Organization were filed on MARCH 14, 2011 and assigned

document number L11000032866

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).

NO Longer want to do business.

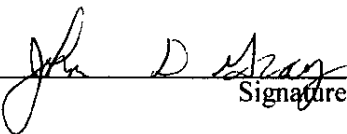
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

JOHN D GRAY

11829 COLYAR LANE

PARRISH FL 34219

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

JOHN D GRAY
Printed Name

FILING FEE: \$25.00