611000036802

| (Re | questor's Name) | | | | |
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| (Ad | dress) | | | | |
| (Ad | dress) | | | | |
| (Cit | y/State/Zip/Phon | e #) | | | |
| PICK-UP | ☐ WAIT | MAIL | | | |
| (Bu | siness Entity Nar | me) | | | |
| (Document Number) | | | | | |
| Certified Copies | _ Certificates | s of Status | | | |
| Special Instructions to | Filing Officer: | | | | |
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Office Use Only



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05/02/14--01013--019 **25.00





FLORIDA DEPARTMENT OF STATE Division of Corporations

May 7, 2014

HARPA HARRIS 15321 BRAHMA RD POLK CITY, FL 33868

SUBJECT: FENRIS SUPPLIES, LLC

Ref. Number: L11000036802

We have received your document for FENRIS SUPPLIES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

Please return the corrected original and one copy of 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.

Letter Number: 514A00009724

Justin M Shivers Regulatory Specialist II Registration/Qualification Section

COVER LETTER

| 10. | Division of Corporations | | | | | | |
|-----|--------------------------|---------------------------------------|---|--|--|--|--|
| | T- | · · · · · · · · · · · · · · · · · · · | (| | | | |

UBJECT: Fencis Supplies LL (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:

Harpa H Harris

(Name of Person)

Fenris Supplies LLC

(Firm/Company)

15321 Brahma Rd

(Address)

Polk Lity, Florida, 338666

(City/State and Zip Code)

For further information concerning this matter, please call:

Harpa H Harri'S at (863) 513 -0374 (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 | y company is | | | | |
|---|--|--|-----------------|----------------------------|---------------------------|
| Fenris | Supplies | 240 | | | |
| 2. The Articles of Organization | • | | and : | assigned | |
| document number | 000036802 | - | | | |
| 3. The delayed effective date the (effective date) | e dissolution if not effect late cannot be prior to or more | tive on the date of filithen than 90 days later than dat | ng: e docume | nt is received for filing) | |
| 4. A description of occurrence 605,0707, Florida Statutes, (c | hat resulted in the limite opy 605.0707 on back co | ed liability company's over letter). | dissoluti | ion pursuant to section | ı |
| No sale n | or profit. | | | | |
| | | | | | |
| 5. If there are no members, ente | and the second s | | | d up the company's | |
| activities and affairs: | Harpa II | - Harris ahma Rd | | | |
| | 15321 Bm | ahma Rd | | | o seren |
| | Polk City. | FL, 3380 | eC | W27 | ir termin g remen å |
| | | | | | |
| 6. Signature of an authorized pelisted above to wind up the com | rson or if there are no moany's activities and affa | embers, the signature | of the po | erson appointed and | Paris. |
| Harpa H-Harri | <u> </u> | HARPA | | | |
| // Signature | | Print | d Name | | |

FILING FEE: \$25.00