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15 FEB II PN 4: 06
SECRETARY OF STATE

T. Burch FEB 1 8 2015

COVER LETTER

TO: Registration Section Division of Corporations					
SixPalms Security Agency LLC					
	ited Liability Company)				
The enclosed Articles of Dissolution and fee(s) are submi	tted for filing.				
Please return all correspondence concerning this matter to	the following:				
Alfredo Gonzalez Jr.					
(Name of Person)					
SixPalms Security Agency LL0					
(Firm/Company)					
805 Cabaret Ct.					
	(Address)				
Kissimmee, Fl. 34759					
(City/St	ate and Zip Code)				
For further information concerning this matter, please call	l:				
Alfredo Gonzalez Jr.	407 701-8811				
(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:	STREET/COURIER ADDRES				
Registration Section Division of Corporations	Registration Section				
P.O. Box 6327	Division of Corporations 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 liabili SixPalms Security Ager						
2.	The Articles of Organization	were filed on 02/06/	2015	_ and assigned	ì		
	document number L11000	047455					
3.	The delayed effective date the (effective of	ne dissolution if not eff date cannot be prior to or m	ective on the date of filing ore than 90 days later than date of	: locument is recei	ved fo	r filing)	
4.	A description of occurrence 605.0707, Florida Statutes, (c	that resulted in the lim copy 605.0707 on back	ited liability company's di cover letter).	ssolution purs	uant	to secti	on
	Business loss money, a	nd no profits were	ever made. It was best	t, to file for \overline{z}	1 * (,) * (,)	ਹੀ	
	a dissolution of business	S.				1834	NAME OF THE PARTY.
				ر د د	72. 10. 10.		
				0	STATE	 F: ⊃§	en.
5.	If there are no members, ente	er the name and addres	s of the person appointed t	o wind up the	com	pany's	
	activities and affairs:	Alfredo Gonzalez	· · · · · · · · · · · · · · · · · · ·				
							
6. Iis	Signature of an authorized poted above to wind up the com	erson or if there are no	members, the signature of	the person ap	poin	ted and	
W	, By al agrass speed by	Alfredo Sonzalez II.					
ltr	edo Gonzalez Jr. ON tn=Affredo Gor email=stxpaim820g Oute: 2015.02.05 00	nzalez Jr., o, ou, Plive.com, c=US	Alfredo Gonzalez J	r.			
Signature			Printed Name				

FILING FEE: \$25.00