

L1160006023

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

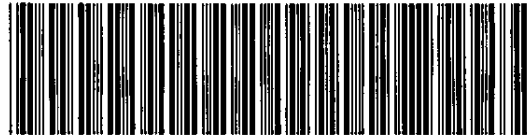
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

2014 AUG 20 AM 11:36

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AUG 21 2014
J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FUSION INDUSTRIES, 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:

James D. Dati

(Name of Person)

Bond, Schoeneck & King, PLLC

(Firm/Company)

4001 Tamiami Trail North, Suite 250

(Address)

Naples, FL 34103-3555

(City/State and Zip Code)

For further information concerning this matter, please call:

James D. Dati

(Name of Person)

239

659-3845

at ()

(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

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**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
Fusion Industries, LLC
2. The Articles of Organization were filed on May 20, 2011 and assigned
document number L11000060023
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).
The consent of all the members (Section 605.0701(2), F.S.).

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

Tax & Accounting of SWFL, LLC

809 Walkerbilt Road, Suite 6

Naples, FL 34110

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

Benjamin Cotrell, CPA

Printed Name

FILING FEE: \$25.00

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CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF S.W. FLORIDA