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of BRHC.

COVER LETTER

	egistration Section ivision of Corporations				
SUBJECT	The Family Literacy Academy of Ta	mpa Bay, LLc			
SCHOLLC I		Liability Company)		•	
	ed Articles of Dissolution and fee(s) are submitted				
	Liza McFadden				
(Name of Person)					
(Firm/Company)					
516 N. Adams Street					
(Address)					
	Tallahassee, Florida 32301	•		~3	
	(City/State	and Zip Code)		2014 HAY	carding
For further	information concerning this matter, please call:		AND TARO	1AY 16	
F	Roosevelt Alexander	850 562-5300	1, T	PH	
_	(Name of Person)	(Area Code & Daytime Telephone Numl	ber)	կ։ 17	
Enclosed is	a check for the following amount:		\$ <u>></u> 4	_	
▽ \$2	25.00 Filing Fee and Certificate of Dissolution	S55.00 Filing Fee, Certificate of Dissolution Certified Copy (additional copy is enclosed			
	MAILING ADDRESS: Registration Section	STREET/COURIER ADDI Registration Section	RESS:		
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building			
	Tallahassee, FL 32314	2661 Executive Center Circle	e		

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is The Family Literacy Academy of Tampa Bay, LLC					
2.	The Articles of Organization	n were filed on <u>06/22/2</u>	2011	and assigned		
	document number L11000		_			
3.	The delayed effective date t	he dissolution if not effe date cannot be prior to or mo	ective on the date of filing re than 90 days later than date d	06/30/2014 ocument is received for filing)		
4.	A description of occurrence 605.0707, Florida Statutes, (Establishing thier own 5	copy 605.0707 on back	cover letter).	ssolution pursuant to section		
		<u>.</u>				
						
5	If there are no members, en	ter the name and address	s of the person appointed to	o wind up the company's		
٠.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: The Barbara Bush Foundation for Family Literacy, Inc.					
	activities and arians.	516 N. Adams Stre		WH AIR		
		Tallahassee, Florid	da 32301	2888 2888 2014		
		Attn: Liza McFadd	en	PR PR I		
6. lis	Signature of an authorized pattern sted above to wind up the cor	person or if there are no mpany's activities and al	members, the signature of fairs:	the person appointed and		
	Ling Me Sud	ldu	Liza McFadden			
	Signature		Printed	Name		

FILING FEE: \$25.00