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SECRETARY OF STATE
AND AND SEFF FLORIDA

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## COVER LETTER

Division of Corporations	
SUBJECT: Novak Forney and Assoc	iates
(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:	
Mark Forney (Name of Person)	
Mark Forney LLC (Firm/Company)	
6105 memorial Hwy	, suiteD
Tampa FL 33615 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Mark Forney at (813) 2 (Name of Person) (Area Code & Day	time Telephone Number)
Enclosed is a check for the following amount:	HANN DE
■ \$25.00 Filing Fee and Certificate of Dissolution □ \$55.00 Filing Fee, Certified Copy (addit	ional copy is enclosed)
MAILING ADDRESS: STREET/C	OURIER ADDRÉSS: 5
Registration Section Registration	
Division of Corporations Division of C	
P.O. Box 6327 Clifton Build	
Tallahassee, FL 32314 2661 Execut Tallahassee,	ive Center Circle FL 32301

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is
Novala Forney and Associates, LLC.
2. The Articles of Organization were filed on 8102011 and assigned
document number L11000092012
3. The delayed effective date the dissolution if not effective on the date of filing: 112412018 (effective date cannot be prior to or more than 90 days later than date document is received for filing)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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).
Partners decided to go seperate ways
<b>28</b>
4.555555 <b>7</b>
5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: Mark Forney
6105 Memorial Hwy, SuiteD
Tampa, FL 33615
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:
1 /
Wish Town
Signatury Printed Name
FILING REF. \$25.00