

LH000/08922

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

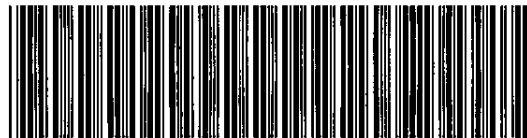
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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14 MAR 24 PM 3:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1 Bush MAR 28 2014

*[Handwritten signature]*

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Your Closing Experts, 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:

Tammy Brasher

(Name of Person)

Your Closing Experts, LLC

(Firm/Company)

17557 C.R. 455

(Address)

Montverde, FL 34756

(City/State and Zip Code)

For further information concerning this matter, please call:

Angela Briscoll

(Name of Person)

at ( 352 ) 536-5771

(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 company is  
Your Closing Experts, LLC
2. The Articles of Organization were filed on 09/23/11 and assigned  
document number L11000108922
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).  
Your Closing Experts, LLC would like to dissolve the company due to no longer  
conducting business. (Mobile closings)
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
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

Tammy Brasher

Printed Name

**FILING FEE: \$25.00**

**FILED**  
14 MAR 24 PM 3:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA