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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2019 OCT 16 PM 7:01  
TALLAHASSEE, FL  
FBI

NOV 05 2019  
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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** N736XL, 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:

JEFFREY L SAUEY ESQUIRE

(Name of Person)

JEFFREY L SAUEY PA

(Firm/Company)

1721 SE 16TH AVE SUITE 101

(Address)

OCALA FLORIDA 34471

(City/State and Zip Code)

For further information concerning this matter, please call:

JEFFREY L SAUEY

(Name of Person)

at ( 352 ) 402-0300

(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

N736XL, LLC

2. The Articles of Organization were filed on 10-05-2011 and assigned

document number L11000114119

3. The delayed effective date the dissolution if not effective on the date of filing: DATE OF FILING  
(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).

The sole Member of the LLC has consented to its dissolution following the sale of its sole asset.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: LORA D. BARRETT

5510 NW 40th Loop

OCALA FLORIDA 34482

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:

Lora D. Barrett  
Signature

LORA D. BARRETT

Printed Name

**FILING FEE: \$25.00**

FILED  
2019 OCT 16 PM 7:01  
SCL  
HALL/HASSELL, F.