LICOUI ZZIOT

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000320389450

11/08/18--01012--019 **29.00

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Electric Vic Lin (Name of Limited I	Liability Company)				
The enclosed Articles of Dissolution and fee(s) are submitted	for filing.				
Please return all correspondence concerning this matter to the	following:				
Victor (Name o	Mardle (Person)				
	Limited Linbility ompany) Company, ARVIS Ct.				
2349 J	ARUIS Ct.				
The Villages, (City/State a	F1 32162 nd Zip Code)				
For further information concerning this matter, please call:					
Victor WARDE (Name of Person)	at (<u>352</u>) <u>255 - 7058</u> (Area Code & Daytime Telephone Number) 4- 352 - 353 - 6730				
Enclosed is a check for the following amount:	- ,- •				
\$25.00 Filing Fee and Certificate of Dissolution	□ \$55.00 Filing Fce, Certificate of Dissolution & Certified Copy (additional copy is enclosed)				
MAILING ADDRESS: Registration Section Division of Corporations	STREET/COURIER ADDRESS: Registration Section Division of Corporations				
P.O. Box 6327	Clifton Building				

Tallahassee, FL 32314

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The name of a limited liability of the l		imite.	1 Li	Abity	Compi	9N Y
2. The Articles of Organization we	ere filed on	Oct. 2	5, 20	and a	issigned	·
document number	100016	217				
3. The delayed effective date the d (effective date Note: If the date inserted in this b listed as the document's effective	lock does not mee	et the applicab	le statutory	filling:	3/3/ nt is received for nents, this date	filing) will not b
A description of occurrence that 605.0707, Florida Statutes, (cop-	resulted in the y 605.0707 on b	limited liabil ack cover let	ity compar ter).	ıy's dissoluti	on pursuant t	o section
Mayin	9					;
	/					
						ر ڪ
5. If there are no members, enter the activities and affairs:		ictor	R. L	UArdA	e .	
		2049	7 J.	ARUIS	s Ct.	
_	The	. Vil.	IA ge:	5, F <u>l</u>	3214	ندع
5. Signature of an authorized person isted above to wind up the compar	on or if there are	no members	, the signa	ture of the pe	rson appointe	ed and
Righture Signature	\.		Victo	R R. d	WArdk	<u></u>

FILING FEE: \$25.00