

L11000122-494

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

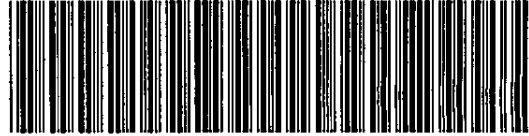
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400270189574

03/05/15--01011--023 **25.00

FILED

15 MAR -5 PM 1:31

CLERK OF STATE
TALLAHASSEE, FLORIDA

MAR 23 2015

C. CARROTHERS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CDH ELECTRONICS,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:

THOR SVEINSVOLL

(Name of Person)

CDH ELECTRONICS, LLC

(Firm/Company)

301 SE 9TH AVE

(Address)

CAPE CORAL, FL 33990

(City/State and Zip Code)

For further information concerning this matter, please call:

THOR SVEINSVOLL

(Name of Person)

239

at ()

410-0200

(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
CDH ELECTRONICS, LLC
2. The Articles of Organization were filed on 10/26/2011 and assigned
document number L11000122494
3. The delayed effective date the dissolution if not effective on the date of filing: 02/01/2015
(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).
BUSINESS CLOSED, FINAL FEDERAL TAX RETURN FILED.
5. If there are no members, enter the name and address of the person appointed to wind up the company
activities and affairs: THOR SVEINSVOLL
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:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 MAR -5 PM 1:34

FILED


Signature

THOR SVEINSVOLL

Printed Name

FILING FEE: \$25.00