

L11 000 130247

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

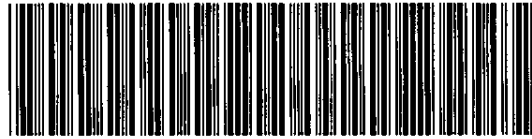
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/27/13--01008--005 **25.00

13 DEC 27 PM 12:12
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STRATEGIC LINKS 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:

MARY E. PURDY
(Name of Person)

(Firm/Company)

5400 NW 26th LANE
(Address)

OCALA, FL 34482
(City/State and Zip Code)

For further information concerning this matter, please call:

MARY E. PURDY at (352) 280-0540
(Name of Person) (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

STRATEGIC LINKS LLC

2. The Articles of Organization were filed on NOVEMBER 16, 2011 and assigned
document number L11000130247

3. The delayed effective date the dissolution if not effective on the date of filing: 12/31/2013

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).

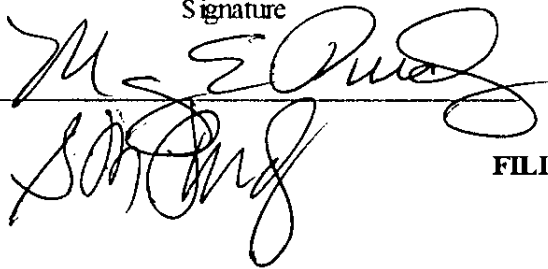
NO LONGER CONDUCTING BUSINESS IN THIS NAME.

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

MARY E. OR SCHUYLER M. PURDY
5400 NW 26th LANE
OCALA, FL 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:

Signature



Printed Name

MARY E. PURDY
SCHUYLER M. PURDY

FILING FEE: \$25.00

FILED
13 DEC 27 PM 12:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA