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(Requestor's Name)						
. (Address)						
· (Address)						
(Cit	ty/State/Zip/Phone	e #)				
PICK-UP	☐ WAIT	MAIL				
(Bu	siness Entity Nan	ne)				
(Document Number)						
Certified Copies	_ Certificates	of Status				
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K.SALY EXAMINER APR 3 0 2015

COVER LETTER

Division of Corporations							
SUBJECT:	Articles of Dissolution for Grammpa's BBQ LLC						
	(Name of Limited	Liability Compan	y)				
The enclosed Articles of Dissolution and fee(s) are submitted for filing.							
Please return	all correspondence concerning this matter to th	e following:					
	Frank Hawa						
	Ernest Hanna						
	(Name of Person)						
	Grammpa's BBQ LLC						
	(Firm/Company)						
	9405 Azalea Ridge Circle						
	(Address)						
	Tampa, FI 33647						
	(City/State and Zip Code)						
For further in	nformation concerning this matter, please call:						
Ernest Hanna		813	486-2736				
	(Name of Person)		de & Daytime Telephone Num	ber)			
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:

TO:

Registration Section

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

2016 APR 17 PM MALLAHASSEE, FLOOR
_ and assigned
scolution pursuant to section
o wind up the company's

1.	The name of a limited liabil Grammpa's BBQ LLC	ity company is		MLLAHASSEE, FL			
2.	The Articles of Organization	n were filed on <u>4/5/20</u>)14	_ and assigned			
	document number L11000	142651					
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 605.0707, Florida Statutes, (that resulted in the lim copy 605.0707 on back	nited liability company's d c cover letter).	issolution pursuant to section			
	Owners voluntarily clos	ed the business.					
5.	If there are no members, ent	If there are no members, enter the name and address of the person appointed to wind up the company's					
	activities and affairs: Ernest Hanna						
	9405 Azalea Ridge Circle						
		Tampa FI 33647					

6. lis	Signature of an authorized pated above to wind up the con	person or if there are no npany's activities and a	o members, the signature of	f the person appointed and			
	c 4 1						
(PM B.	<u> </u>	Ernest Hanna				
Signature		Printed	Printed Name				

FILING FEE: \$25.00