

L11000143776

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

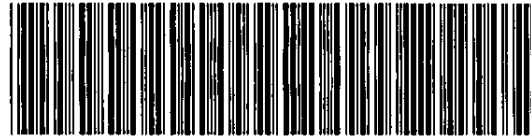
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
2014 JAN 27 PM 4:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN 30 2013

T. HAMPTON

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** **WOOF GANG BAKERY SWF, 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:

**ANITA J CASS**

(Name of Person)

(Firm/Company)

**133 COUGAR WAY**

(Address)

**ROTONDA WEST, FL 33947**

(City/State and Zip Code)

For further information concerning this matter, please call:

**ANITA CASS**

(Name of Person)

at **941 204-7585**

(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  
WOOF GANG BAKERY SWF, LLC
2. The Articles of Organization were filed on DEC. 23, 2011 and assigned  
document number L11000143776
3. The delayed effective date the dissolution if not effective on the date of 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).  
SOLD BUSINESS  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: ANITA CASS  
133 COUGAR WAY  
ROTONDA WEST, FL 33947  
\_\_\_\_\_
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

Anita Cass

Anita Cass

**FILING FEE: \$25.00**

**FILED**  
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