L12000006189

(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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02/12/13--01017--010 **25.00

SECRE IANT CORPORATIONS
JIVISION OF CORPORATIONS

C. LEWIS FEB 1 8 2013 EXAMINER

COVER LETTER

"ŢO:

Registration Section
Division of Corporations

_ TRAVEL & LEISURE CONCIERGE, 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:

TOM SHANNON

(Name of Person)

TOM SHANNON CPA PC

(Firm/Company)

1568 N. WAKONDA ST.

(Address)

FLAGSTAFF, AZ 86004

(City/State and Zip Code)

For further information concerning this matter, please call:

AMANDA NELSON

928

377-3368

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

ρ \$25.00 Filing Fee

ρ \$30.00 Filing Fee & Certificate of Status p \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) p \$60.00 Filing Fee, Certificate of Status & 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

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

2013 FEB 12 AM 11: 46

	Service of the Mills Ath
1. The name of a limited liability company is	
TRAVEL & LEISURE CONCIERGE, LLC	
2 The Amilian CO 1 1 7 7 1 01/12/	2012
2. The Articles of Organization were filed on 01/12/	and assigned document number
L12000006189	
40/04/00	40
3. The date the dissolution was approved: 12/31/20	12
4. A description of occurrence that resulted in the limit 608.441, Florida Statutes, (copy 608.441 on back co	ted liability company's dissolution pursuant to section
·	TSELF PER ANNUAL MINUTE MEETING.
COM ANT RECOEVED TO BIOCCEVET	TOLLI I LIVANINOAL MINOTE MELTING.
The same of the sa	
5. CHECK ONE:	
All debts, obligations and liabilities of the li	imited liability company have been paid or discharged.
-OR-	
☐ Adequate provision has been made for the d	lebts, obligations and liabilities pursuant to s. 608.4421.
 All remaining property and assets have been distriburights and interests. 	ated among its members in accordance with their respective
7. CHECK ONE:	
■ There are no suits pending against the comp	any in any court
-OR-	
Adequate provision has been made for the seen tered against it in any pending suit.	atisfaction of any judgment, order or decree which may be
entered against it in any pending suit.	
Signatures of the members having the same percentage of	membership interests necessary to approve the dissolution:
Signature	Printed Name
	EADE HOPKINSON, PRESIDENT OF HOPKINSON-WOLTERS, INC.
<i>'</i>	

FILING FEE: \$25.00