112000001167

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	ty/State/Zip/Phone	e#)	
	WAIT	MAIL	
(Bu	siness Entity Nar	ne)	
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
·			

Office Use Only



200256756442

02/20/14--01008--020 **25.00



J. Sertivers FEB 2.1 2014

COVER LETTER

TO:

Registration Section Division of Corporations

Torturemate,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:

Heidi Calahan		
(Name of Person)		
(Firm/Company)		
209 13th Street		
(Address)		
St. Augustine, FL 32084		

(City/State and Zip Code)

For further information concerning this matter, please call:

Heidi Calahan

(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

	The name of a limited liabili Torturemate, LLC	ty company is		
	The Articles of Organization document number	n were filed on January 20, 2012 0009867	and assigned	
		ne dissolution if not effective on the date of fil	ling: February 1, 2014	
6	A description of occurrence 605.0707, Florida Statutes, (o Never generated inco	that resulted in the limited liability company's copy 605.0707 on back cover letter).	s dissolution pursuant to section	
-	gonoratou illoo			
-				
	If there are no members, ento activities and affairs:	er the name and address of the person appoint Heidi Calahan	ed to wind up the company's	
6. S	Signature of an authorized pove to wind up the company	erson or if there are no members, the signature s activities and affairs:	e of the person appointed and liste	
	Sianatura	Prin	Printed Name	
	Signature		ited (vaine	

FILING FEE: \$25.00