# 00 16905

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

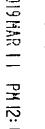
Office Use Only



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#### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Council Enterorises 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:
Vikginia Pollar (Name of Person)
Council Enterprises. (Firm/Company)
1418 Coluso Da (Address)
Winter Garden Fl 34787 (City/State and Zip Code)
For further information concerning this matter, please call:
Vinginia Dollar at (40) 353-6208 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee and Certificate of Dissolution

#### 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		PM 12: 44
	Council Enterprises LLC		
2.	The Articles of Organization were filed on Feb 03, 2012 and ass	igned	玩見
	document number <u>L12000016905</u>		
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  Note: If the date inserted in this block does not meet the applicable statutory filing requirement listed as the document's effective date on the Department of State's records.	s received for mini	z) not be
4.	A description of occurrence that resulted in the limited liability company's dissolution 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).		
	sold business related to LLC		_
			_
			_
			_
5.	If there are no members, enter the name and address of the person appointed to wind u	p the company	's
	activities and affairs: Virginia Vallar		_
	1418 Coluso De	<u> </u>	_
	Winter Garden, Fl		
	34187		_
6. lic	Signature of an authorized person or if there are no members, the signature of the persected above to wind up the company's activities and affairs:	on appointed ar	nd
113	decompany s activities and arraits.		
	unin Dal	o ၇	_
	Signature Printed Name FILING FEE: \$25.00		
	# 1 L # 1 L # 1 L # 2 L		

### Notice of Limited Liability Company Dissolution

#### NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: Council Enter Prises LLC
Document number of Limited Liability Company is: <u>L120000/6905</u>
Date of dissolution was: 3/01/2019
Description of information that must be included in a written claim:
sold business related to LLC on 2/15/19
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  Vinginia Dollar  1418 Coluse Dr  Winter Garden Fl 34787
A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00