L/2000001778

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-U	P WAIT MAIL	
	(Business Entity Name)	
	0	
	(Document Number)	
Certified Copies	Certificates of Status	
Special Instructions	s to Filing Officer	
Special instructions	FEB 1 9 2013 A. LUNT	
		_

Office Use Only



400256663364

02/13/14--01024--004 **25.00

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Raised on Rhythm 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:
The enclosed Articles of Dissolution and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Person)
(Firm/Company)
1700 N. MONROE ST. #11-349
1700 N. MONROE SI, #11-349 (Address) TALLAHASSEE FL 32303 (City/State and Zip Code)
For further information concerning this matter, please call:
NATHAN VAN DYK at (\$50) 509-3493 (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 Clifton Building

Tallahassee, FL 32314

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		
	RAISED ON RHYTHM, LLC.	_ .	
2.	The Articles of Organization were filed on $\frac{FcW_{VNY}}{2012}$ and assigned document number $\frac{L}{2000021778}$		
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 se 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).	ction	
	No need -	<u> </u>	- n
			۱. سیے
	TANK THE PARTY OF	w	
	EF-C	72	
5.	If there are no members, enter the name and address of the person appointed to wind up the company	·s (2)	
	activities and affairs:	O'	
		_	
			
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed a pove to wind up the company's activities and affairs:	nd listed	l
	Signature Printed Name		
	NATHAN VA	ND	YĮ

FILING FEE: \$25.00