U120000 26443

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL .
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

J. Shivers JAN 23 2015

Andrea Chandler Chase Chandler (661)496-6189 6619 Waterton Drive Riverview, FL 33578

C-NAR, LLC Voluntary Disolution

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: C-NAR, 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:
Andrea Chandler (Name of Person)
(Firm/Company)
6619 Waterton Drive (Address)
Riverview FL 33578' (City/State and Zip Code)
For further information concerning this matter, please call:
Andrea Chandler at (1661) 496-6189 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: S25.00 Filing Fee and Certificate of Dissolution S55.00 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 C-NAR, LLC
2.	The Articles of Organization were filed on <u>21242012</u> and assigned
	document number L120000 26843
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 received for 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).
	Company did not make any money.
	Company closed since 1/01/2013.
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs:
	FLOR 8. 5
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs:
_(India Chandle Andrea Chandler
	Signature Printed Name

FILING FEE: \$25.00