# L12000039921

(Re	equestor's Name)				
(Address)					
(Address)					
(Cit	ty/State/Zip/Phone	: #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nam	ne)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to	Filing Officer:				

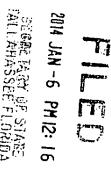
Office Use Only

FFF CTIVE DATE



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# **COVER LETTER**

TO:	Registration Section
	Division of Corporations

SUBJECT: Paramount Quality Works I.C. (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:

•	(Name of Person)					
DeShawn	E. Mar	shall	MGRM	<del>.</del>		
apa Midway	(Firm Company)		, -	るので発	2014 JAN	<b></b>
New Smi	(Address)	FI	32168	PASSEE VIEW	9-	
1,40,40	(City State and Zip Code)	<u> </u>	06100	ELORID!	PH 12: 16	

For further information concerning this matter, please call:

(Name of Person) at (321) 617-7315 (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

1. The name of a limited liability company is
2. The Articles of Organization were filed on $\frac{52}{20}$ and assigned document number $\frac{120001209}{21}$
3. The delayed effective date the dissolution if not effective on the date of filing: 12 31 13
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).  The Company took a tremendous 1055
are to the industry. There was not enough business contracts to keep the company viable
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:  De Shawn E Marshall MbkM  De Midway Street  New Smyrha Beach FL 32168
6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:
Restaur E. Mustall DeShawn E. Marshall -
FILING FEE: \$25.00