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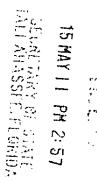
(Requestor's Name)						
(Address)						
(Address)						
(Cit	y/State/Zip/Phone	e #)				
PICK-UP	WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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##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

TO:	Registration Section Division of Corporations					
CHID II	Sculley LLC					
SUBJI		ed Liability Company)				
The en	sclosed Articles of Dissolution and fee(s) are submitt	ed for filing.				
Please	return all correspondence concerning this matter to	the following:				
	Janice M Kelley					
	(Name of Person)					
	Sculley LLC					
	(Firm/Company)					
	5828 Windwood Dr					
		Address)				
	Lakeland, FL 33813					
	(City/Sta	te and Zip Code)				
For fu	rther information concerning this matter, please call:					
Janice Kelley		863 838-9086				
	(Name of Person)	at ()(Area Code & Daytime Telephone Number)				
Enclose	ed is a check for the following amount:					
		\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)				
	MAILING ADDRESS:	STREET/COURIER ADDRESS:				
Registration Section		Registration Section				
Division of Corporations		Division of Corporations				
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle				
	1 ananassee, FL 32314	Tallahassee, FL 32301				

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liabil Sculley LLC	ity company is		<u> </u>		
2.	The Articles of Organization were filed on and assigned					
	document number	5 <b>934</b>	_			
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)					
<ul> <li>4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to s 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).</li> <li>This LLC was never productive and up and running.</li> </ul>						
			1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:  Janice M Kelley						
		Melissa Lopez		15 M		
		Martha Fultz		202 T		
				PH 7		
6. lis	Signature of an authorized sted above to wind up the co	person or if there are no r npany's activities and aff	nembers, the signature of tairs:	the person appointed and		
7	Signature	<u> </u>	Janice m	Kelley Name 7		
1	Signature	() FILING F	EE: \$25.00	,		