UZ 0000 97175

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
<u> </u>		





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J. SUNDERS APR 17 785



COVER LETTER + .

SUBJECT: INGENETEK 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:								
rease return an correspondence concerning this matter to the following.								
TREVOR T. BRIEDE								
(Name of Person)								
TNGENETEK LLC (Firm/Company)								
(Firm/Company)								
- O								
2338 IMMOKALEE RD #309 (Address)								
(Address)								
NAPLES, FL 34110								
(City/State and Zip Code)								
For further information concerning this matter, please call:								
TREVER T BRIENE 11239 590-7012								
TREVOR I. BRIEDE at (239) 580-7012 (Name of Person) (Area Code & Daytime Telephone Number)								
Enclosed is a check for the following amount:								
X \$25.00 Filing Fee and Certificate of Dissolution ☐ \$55.00 Filing Fee, Certificate of Dissolution &								
S23.00 Fining Fee and Certificate of Dissolution Certified Copy (additional copy is enclosed)								

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> 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

The name of a limited liability	company is	LLC			
The Articles of Organization v				l assigned	
document number	00009717	5			
The delayed effective date the (effective da	dissolution if not elute cannot be prior to or r	ffective on the d nore than 90 days h	late of filing: ater than date docum	nent is received for fil	ing)
A description of occurrence the 605.0707, Florida Statutes, (co	py 605.0707 on bac	k cover letter).			
COMPAN	UY CLOSE	υ,			
	-				
				, , , , , , , , , , , , , , , , , , , 	
If there are no members, enter	the name and addre	ess of the person	appointed to wi	nd up the compar	ny's
activities and affairs:					
-					5 MA
					R 30
-					
-				FE.C.	_ <u>:</u>
Signature of an authorized per sted above to wind up the comp	son or if there are nany's activities and	o members, the affairs:	signature of the	person appointed	क्षि
11	RI	TRE	ron I, i	BNEDE	
Signature		<u></u>	Printed Nan	ne	
	FILING	FEE: \$25.00			
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Margaret L. Lee

Margaret L. Cee