

L12000106254

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

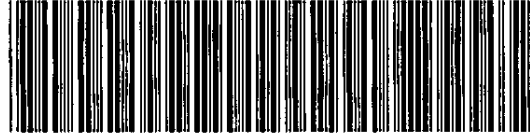
(Document Number)

Certified Copies _____

Certificates of Status ☒

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03/16/15--01020--011 **25.00

FILED
15 MAR 16 PM 12:20
SHARON L. ST. JAMES
TALLAHASSEE, FLORIDA

APR - 6 2015

T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PST ASSOCIATES 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:

GARRY F. CAGLE

(Name of Person)

(Firm/Company)

881 WHITE IVEY COURT

(Address)

APOPKA, FLORIDA 32712

(City/State and Zip Code)

For further information concerning this matter, please call:

GARRY CAGLE

(Name of Person)

at

(407) 506 4264

(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

FILED
15 MAR 16 PM 12:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

PST ASSOCIATES LLC

2. The Articles of Organization were filed on 8/17/2012 and assigned

document number L12000106254

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).

LACK OF WORK

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

GARRY F. CABLE

881 White Ivey Court

APOPKA, Florida 32712

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:


Signature

GARRY F. CABLE
Printed Name

FILING FEE: \$25.00