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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT

Consolidation Resource, 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:

Melissa Nieken							
(Name of Person)							
Speedwell Holdings, LLC							
(Firm/Company)							
325 E. WarmSprings Rd. Suite 200							
(Address)							
Las Vegas, NV 89119							

(City/State and Zip Code)

For further information concerning this matter, please call:

Melissa Nieken (Name of Person) (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount:

MAILING ADDRESS:

■ \$25.00 Filing Fee and Certificate of Dissolution

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

□ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY



1.				2019 }	8	AHTT: 47
	Consolidation Resource, LLC	· 	·			·
2.	The Articles of Organization	on were filed on		and assig	ned,	
	document number 1.120001	171118				
3.	The delayed effective date teffective	the dissolution if not effective date cannot be prior to or more th	ve on the date of filing:	10/15/201	9 ereived	Star liling)
	Note: If the date inserted in	this block does not meet the appetitive date on the Department of	plicable statutory filing re	quirements	this c	date will not be
4.	A description of occurrenc 605.0707. Florida Statutes,	e that resulted in the limited (copy 605.0707 on back cov	liability company's dis er letter).	solution p	ursuai	nt to section
	Agreement of Member					
		-			-	
				<u></u>		
						
5.	If there are no members, er activities and affairs:	tter the name and address of Corey Owens (CEO)	the person appointed to	wind up	the co	ompany's
		325 E. WarmSprings Rd. Su	ite 200			
		Las Vegas, NV 89119				
6. lis	Signature of an authorized sted above to Wind up the ec	person or if there are no mer mpany's activities and affair	mbers, the signature of s:	the persoi	1 арро	inted and
	(20)	χ	Torey Owens			
	Signature		Printed	Name		

FILING FEE: \$25.00