# L12000 129419

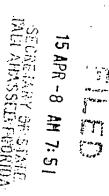
(Requestor's Name)
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PICK-UP WAIT MAIL
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(Document Number)
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04/08/15--01018--014 \*\*25.00



## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Claims 1, 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:
Beth A. Meder (Name of Person)
Claims 1, LLC (Firm/Company)
(Firm/Company)
10302 Palmbrooke, Terr
(Address)
Bradenton, FL 34202
(City/State and Zip Code)
For further information concerning this matter, please call:  941-896-3884
Beth Meder at (401), 529-9573  (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (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  Claims 1, LLC.
2.	The Articles of Organization were filed on Oct 10, 2012 and assigned
	document number <u>L120001294</u> 19
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).
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs:
	Beth Meder
	10302 Palm brooke Jer
	Brudenton, Fl 342625
б. li	Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs:
	Both AMada Both Amador
-,	Signature DCYV A 11 HCC Y

FILING FEE: \$25.00