

L1200044 780

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

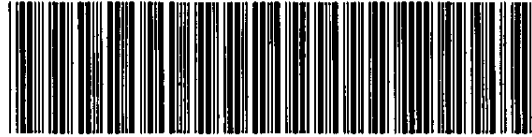
MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:



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01/02/15--01015--017 **25.00

FILED
15 JAN -2 AM 8:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hirschbach 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:

Nancy E. Hirschbach
(Name of Person)

Hirschbach LLC
(Firm/Company)

265 Rilyn Drive
(Address)

West Palm Beach, FL 33405
(City/State and Zip Code)

For further information concerning this matter, please call:

Nancy E. Hirschbach at (310) 739-5120
(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

Hirschbach LLC

2. The Articles of Organization were filed on November 15, 2012 8am and assigned

document number L12000144380

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).

Plan was to dissolve company by end of 2014.

Formed LLC was only to service clients during a
transition and I have transitioned into full-time
employment in a different industry.

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

There is no need for anyone to wind
up or wind down the company. All deals
are closed and no need for anything to
be done.

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:

Nancy Hirschbach
Signature

Nancy E. Hirschbach
Printed Name

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15 JAN 22 AM 8:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE: \$25.00