# L12000/53252

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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### FLORIDA DEPARTMENT OF STATE Division of Corporations

April 9, 2014

WALTER TURLI 1627 SWEETGUM TERRACE WESTON, FL 33327

SUBJECT: WALNEPAL LLC Ref. Number: L12000153252

We have received your document for WALNEPAL LLC. However, the document has not been filed and is being returned for the following:

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Agnes Lunt Regulatory Specialist II

Letter Number: 614A00007631

#### **COVER LETTER**

TO: Registration Section
SUBJECT: 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:
Walnepal LC  (Name of Person)  Walnepal LC  (Him/Company)  1624 8wedgem tenace.  (Address)  Water Fl 33324.  (City/State and Zip Code)
For further information concerning this matter, please call:
Warne 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
2. The Articles of Organization were filed on 03/01/2014. and assigned
document number <u>L12001.53252</u>
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).
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5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
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<u> </u>
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:
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FILING FEE: \$25.00