L13000009681

(Řec	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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(Doc	cument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO:

Registration Section Division of Corporations

SI	iR:	IF.	r

Bridlewood Stables, 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:

Garth Friesen
(Name of Person)
AVM, L.P.
(Firm/Company)
777 Yamato Road, Suite 300
(Address)
Boca Raton, FL 33431
(City/State and Zip Code)

For further information concerning this matter, please call:

Ashley Courtney	_{at} 561 544-4600	
(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

١.	The name of a limited liability company is		
	Bridlewood Stables, LLC		
2.	The Articles of Organization were filed on January 18, 2013 and assigned		
	document number L13000009681		
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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.		
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).		
	The consent of all members		
	17. - 70. - 34.		
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:		
6. Iis	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:		
	My Control Science		
	Garth Friesen Printed Name		
	Signature Printed Name		

FILING FEE: \$25.00