

L17 0000 11474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

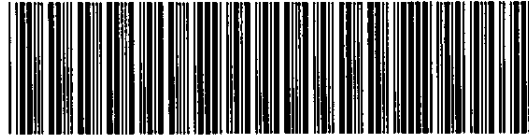
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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12/08/14--01007--019 **25.00

FILED
14 DEC - 8 AM 11: 12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Stivers DEC 15 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hidden Grove Naturals 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:

Paul V Hankey
(Name of Person)

(Firm/Company)

3410 4th Ave NE
(Address)

Naples, FL 34120
(City/State and Zip Code)

For further information concerning this matter, please call:

Paul V Hankey at 239 777-2606
(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
Hidden Grove Naturals

2. The Articles of Organization were filed on 10/19/2011 and assigned
document number L13000011474

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).

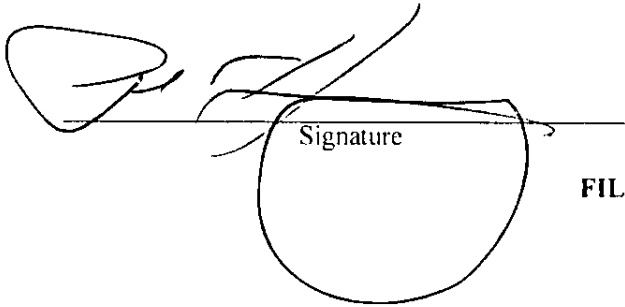
Business was unprofitable. Product commodity dependent making for large swings in costs.
Natural product too expensive versus competition. Great idea, or so I thought.

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

3410 4th Ave NE

Naples, FL 34120

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:


Signature

Paul V Hankey

Printed Name

FILING FEE: \$25.00

14 DEC - 8 AM 11:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED