L17000 011600

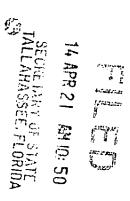
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

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COVER LETTER

	gistration Section vision of Corporations	
SUBJECT:	D. Palmer Fine Woodworking LLC	
SUBSECT.		ed Liability Company)
The enclose	ed Articles of Dissolution and fee(s) are submitt	ed for filing.
Please retur	n all correspondence concerning this matter to	the following:
	Duane Palmer	
	(Nan	ne of Person)
	(Fire	n/Company)
	2112 Darnell cir.	
	(Address)
	Tallahassee, Fl 32303	
	(City/Sta	te and Zip Code)
For further	information concerning this matter, please call:	
D	uane Palmer	505 263-5728
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a	a check for the following amount:	
√ \$2:	5.00 Filing Fee and Certificate of Dissolution	\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)
	MAILING ADDRESS:	STREET/COURIER ADDRESS:
	Registration Section	Registration Section
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle
	. within 1999 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is D. Palmer Fine Working LLC
2.	The Articles of Organization were filed on 1/23/2013 and assigned
	document number L13000011600
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 never made money.
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. lis	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:
-	Duane Palmer
7	Signature Printed Name Printed Name
	FILING FEE: \$25.00