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(Re	equestor's Name)	
(Ac	ddress)	
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PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nan	ne)
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D. SCOTT NOV 1 4 2016

COVER LETTER

TO: Registration Section
Division of Corporations

Double C Saddlery 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:

Annette Brigel

(Name of Person)

Double C Saddlery LLC

(Firm/Company)

559 Haig Point Court

(Address)

Jacksonville, FL 32218

(City/State and Zip Code)

For further information concerning this matter, please call:

Beth W Patterson

(Name of Person)

__904

396-0418

(Area Code & Daytime Telephone Numb

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		
	Double C Saddlery LLC		
2.	The Articles of Organization were filed on January 25, 2013 and assigned		
	document number L13000013221		
3.	The delayed effective date the dissolution if not effective on the date of filing: November 8, 2016 (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 Limited Liability Company ceased operations.		
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:		
	activities and attairs:		
	FILED PARTSEE, F		
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:		
D	Annette Brigel Annette Brigel Printed Name Annette Brigel Annette Brigel Printed Name		

FILING FEE: \$25.00