L13000021097

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(City/State/Zipir-Hone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Certifica copies
Special Instructions to Filing Officer:
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2019 MAR - 4 PH 4: 54 SECRETARY OF STATE FALLAHASSEE, FLORED

APPROVEU . AND FILED

10. 18/15/19

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: CWM Agency (Name of Limited Liability Company)
The enclosed Articles of Dissolution and fee(s) are submitted for filling.
Please return all correspondence concerning this matter to the following:
Carson W. Manchester (Name of Person)
Etwa LLC
(Firm/Company)
(Firm/Company) 685 32 VL CT S, W (Address)
(Address)
UCTO Beach FL 32968
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (772) 205-5391 (Area Code & Daytime Telephone Number)
For the state of the fall antice accounts
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: STREET/COURIER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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	
	CWM Agency	
2.	The Articles of Organization were filed on $\frac{2}{11/13}$ and assigned	
	document number <u>L 130000 210 97</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) 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).	
	<u> </u>	
	NO Sales, No Intrested prospects	ンなな人のよう
5.	If there are no members, enter the name and address of the person appointed to wind up the company's	
	activities and affairs:	
	Carson w, manchester	
	685 32 NO CT 5.6	
	Vero Beach FL, 32968	
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs:	
_	Carson W. Manchester Printed Name	

FILING FEE: \$25.00