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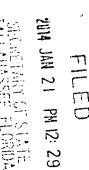
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#### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT

Nicholas's Pantry, 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:

## Mary Beth Batchelor

(Name of Person)

Nicholas's Pantry, LLC

(Firm/Company)

15300 SW Myrtle Drive

(Address)

Indiantown, FL 34956

(City/State and Zip Code)

For further information concerning this matter, please call:

## Mary Beth Batchelor

\_.772

260-6814

(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

FILED 2014 JAN 21 PM 12: 29

1.	The name of a limited liabili Nicholas's Pantry, LL			SLORETARN OF STATE TALLAHASSEE, FLORIDA 		
2.	The Articles of Organization document number L13000		bruary 19, 2013	_ and assigned		
3.	. The delayed effective date the dissolution if not effective on the date of 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).					
	Nicholas's Pantry, LLC	te as a Florida Non Profit				
Corporation.						
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:  Mary Beth Batchelor					
	uctivities and arians.	15300 SW Myrtle Drive				
Indiantown, FL 34956						
6. ab	Signature of an authorized pove to wind up the company	erson or if there are s activities and affa	e no members, the signature of	the person appointed and listed		
Signature		Printed	Printed Name			
4	Mary Beth Ba	tchelow	Mary Beth Batche	lor		

FILING FEE: \$25.00