U3000045270

(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

TO:

Registration Section Division of Corporations

Wheeling & Dealing 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:

Pamela M. Wheeler (Name of Person) Wheeling & Dealing LLC (Firm/Company) 3408 Seminole Avenue (Address)

Naples, FL

(City/State and Zip Code)

For further information concerning this matter, please call:

Pamela M. Wheeler

(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 habit Wheeling & Dealing				
The Articles of Organization document numberL130	n were filed on <u>03/27/2013</u> 000045270	and assign	ned	
3. The delayed effective date	he dissolution if not effective	on the date of filing:		
4. A description of occurrence 605.0707, Florida Statutes,	that resulted in the limited lia copy 605.0707 on back cover	ability company's dissolution puletter).	arsuant to section	
This was for an interr	net business that did no	it work. For tax pu	rooses	
closing as o	12/3//19. Thi	s did no business	at all!	
3	, , , ,			
5. If there are no members, en activities and affairs:	ter the name and address of th Pamela M. Wheeler	e person appointed to wind up t	he company's	
	3408 Seminole Avenue			
	Naples, FL 34112			
Signature of an authorized above to wind up the company	person or if there are no memb 's activities and affairs:	pers, the signature of the person	appointed and listed	
Signature		Printed Name		
Romile M. Wheele	シ	Pamela M Wheeler	20	
	FILING FEE	: \$25.00	M JAN 30 F	
			PM 1: 30 F STATE FEORIDA	