L130000 70883

(Requestor's Name)								
(Ad	dress)							
(Ad	dress)							
(Cit	ry/State/Zip/Phone	e #)						
PICK-UP	☐ WAIT	MAIL						
(Business Entity Name)								
(Document Number)								
Certified Copies	_ Certificates	s of Status						
Special Instructions to	Filing Officer:							



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SEURETARY OF STATE
ASSEE, FLORIDA

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K.SALY EXAMINER JUL 15

COVER LETTER

TO:	Registration Section Division of Corporations								
Good Guys SWL, L.L.C.									
(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:									
John F. Verderame									
	(Name of Person)								
	(Firm/Company)								
9879 Equus Circle									
Boynton Beach, FL 33472									
(City/State and Zip Code)									
For further information concerning this matter, please call:									
John F. Verderame 917 363-3091									
	(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

· • • • • • • • • • • • • • • • • • • •	LED
ALLAHASSE	4 AMII: 02 OF STATE E. FLORID

1.	The name of a limited liability compa	ny is	·	·			ALLAHASSE
2.	The Articles of Organization were file	ed on _	05/14/201	3		_ and assi	gned
	document numberL13000070	883					
3.	The delayed effective date the dissolu (effective date cannot Note: If the date inserted in this block d listed as the document's effective date or	<i>be prior</i> oes not	to or more the meet the app	an 90 days la olicable stati	ter than date utory filing i	document is	
4.	A description of occurrence that resul 605.0707, Florida Statutes, (copy 605.	ted in t 0707 o	he limited in back cover	liability con er letter).	mpany's di	issolution _l	oursuant to section
	The company did not conduct business as			,			
	If there are no members, enter the name activities and affairs:			he person	appointed	to wind up	the company's
	9879 Eq	nus Circ	ile	-	<u>.</u> ,, , , ,		
	Boynton	Beach,	FL 33472				
_	_ .				·		
5. ist	Signature of an authorized person or ited above to wind up the company's ac	f there	are no men and affair	ibers, the s	ignature of	f the person	appointed and
	Of Gr		Ie	ohn F. Verde	2 72710		
	Signature			mir, veiuc	Printed	Name	
		FII	LING FEE	: \$25.00			