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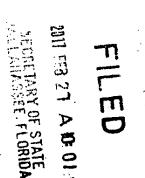
(Re	equestor's Name)		
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PICK-UP	☐ WAIT	MAIL	
(Bu	ısiness Entity Nam	e)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			

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COVER LETTER*

TO: Registration Section
Division of Corporations

URIFCT: EW Associates, 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:

Malinda Webster	
(Name of Person)	
DW Associates, LLC	
(Firm/Company)	
12327 Fort King Highway	
(Address)	
Thonotosassa, FL 33592	

(City/State and Zip Code)

For further information concerning this matter, please call:

Malinda Webster

.,813

397-5812

(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

The name of a limited liability compared EW Associates, LLS	ny is	
2. The Articles of Organization were file	d on May 17, 2013	and assigned
document number L13000072359		
3. The delayed effective date the dissolut (effective date cannot Note: If the date inserted in this block do listed as the document's effective date on	es not meet the applicable statu	tory filing requirements, this date will not
4. A description of occurrence that result 605.0707, Florida Statutes, (copy 605.0	ted in the limited liability con 0707 on back cover letter).	npany's dissolution pursuant to section
Entity no longer active		
_		
5. If there are no members, enter the namactivities and affairs:	ne and address of the person a	appointed to wind up the company's
6. Signature of an authorized person or it	f there are no members, the si	gnature of the person appointed and
listed above to wind up the company's ac	tivities and affairs:	gnature of the person appointed and
maluda Miliola	Malinda M W	
Signature		Printed Name
	FILING FEE: \$25.00	

FILED
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SEPRETARY OF STATE