

L130000 76408

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

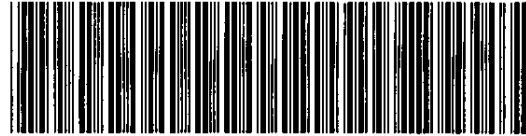
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/21/14--01009--008 **25.00

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2014 MAY 20 PM 3:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 21 2013

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SRQ metropolis 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:

Carolyn K. Hardy
(Name of Person)

(Firm/Company)

8734 45th Ter E
(Address)

Bradenton FL 34211
(City/State and Zip Code)

For further information concerning this matter, please call:

Carolyn Hardy at (941) 962-1050
(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 liability company is

SRO Metropolis LLC

2. The Articles of Organization were filed on 05/24/2013 and assigned

document number L13000076408

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)

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).

The amount of sales of the product - never
covered the cost to remain open. We closed the
doors 11/15/2013 due to lack of business and
very minimal sales.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Carolyn Hardy

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

Carolyn K Hardy
Signature

Carolyn K. Hardy
Printed Name

FILING FEE: \$25.00

2014 MAY 20 PM 3:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED