L17000095424

(Re	questor's Name)	
bA)	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
		MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	· · · · · · · · · · · · · · · · · · ·
	Office Use Only	, ,

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01/27/14--01023--001 **25.00



A Sativers JAN 3 0 2013

COVER LETTER

TO: Registration Section Division of Corporations

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Quitalgors Quality By Design (Name of Limited Liability Company) SUBJECT:

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KEVIN YLONEN	·····	
(Name of Person)		
Outdoors Quality By Design (Firm/Company)	<u> </u>	
PO Box 120962		
(Address)		
Cleamont FL. 34712		
(City/State and Zip Code)		
For further information concerning this matter, please call:	A Constraint of the second sec	
KEVEN YLONEN at (850) 557-33		
(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 liabil		
Outdoors	Quality By Design	
2. The Articles of Organizatio	n were filed on <u>71513</u> and assigned	
document number <u>L1300</u>	2009424	
3. The delayed effective date t	he dissolution if not effective on the date of filing:	
	that resulted in the limited liability company's dissolution pursuant to section (copy 605.0707 on back cover letter).	
Loss of Lr	come and Lacked Business	
201 0-00-00-00-00-00-00-00-00-00-00-00-00-0		
<u> </u>		
5. If there are no members, en	ter the name and address of the person appointed to wind up the company's	
activities and affairs:	activities and affairs:	
6. Signature of an authorized p above to wind up the company	person or if there are no members, the signature of the person appointed and listed 's activities and affairs:	
Signature	Printed Name	
2. Ch		

:

KEVIN KONEN

FALLAL)

FILING FEE: \$25.00