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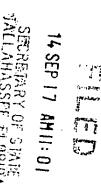
(Red	questor's Name)	
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(City	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
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Office Use Only



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COVER LETTER

10:	Divi	ision of Corporations			
SUBJE	CT:	Flam-Tap Network Consulting LLC	;		
		(Name of Limite	d Liability Compar	ny)	
The enc	losed	Articles of Dissolution and fee(s) are submitted	ed for filing.		
Please re	eturn	all correspondence concerning this matter to t	he following:		
		Terry Willis			
		(Nam	e of Person)		
	(Firm/Company)				
		7161 N Serenoa Drive			
			Address)		
		Sarasota, FL 34241			
		(City/Stat	e and Zip Code)		
For furtl	her ir	formation concerning this matter, please call:			
	Те	rry Willis	703	864-8871	
		(Name of Person)	at ((Area Co	ode & Daytime Telephone Number)	_
Enclosed	l 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:	STR	EET/COURIER ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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 Flam-Tap Network Consulting LLC
2.	The Articles of Organization were filed on August 1, 2013 and assigned
	document number
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). I am no longer working as a consultant and have begun work as a full time employee
	for another company.
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and steed above to wind up the company's activities and affairs:
	FILING FEE: \$25.00
	FILING FEE: \$25.00