1300108487

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

Office Use Only



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03/04/15--01007--005 **25.00

5 MAR -4 AM 9:2

10

MAR 23 2015

R. WHITE

COVER LETTER

Division of Corporations						
SUBJECT:	LIFE CAPTURED, LLC					
	(Name of Limite	d Liability Company)				
The enclosed Articles of Dissolution and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
KENNETH DAVIS						
(Name of Person)						
	(Firm/Company)					
	5104 QUINTILIS STREET					
(Address)						
SPRING HILL, FL 34608						
(City/State and Zip Code)						
For further information concerning this matter, please call:						
	KENNETH DAVIS					
	KENNETTI BAVIO	at (352) 238 - 3818				
	(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:

TO:

Registration Section

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

PHLEE

1.	The name of a limited liability con		CAPTURED, LLC	15 MAR -4 AM 9:25		
2.	The Articles of Organization were	e filed on	08/01/2013	and assigned		
	document numberL130001084	87				
3.	The delayed effective date the dis	solution i	f not effective on the date or to or more than 90 days later	of filing: than date document is received for filing)		
4.	oany's dissolution pursuant to section					
MEMBERS ARE NO LONGER OPERATING OR CONDUCTING BUSINESS						
UNDER THIS ENTITY. BUSINESS IS NOW DEFUNCT. 5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:						
	5104 QUINTILIS STREET					
	SP	RING H	ILL, FL 34608			
6. lis	Signature of an authorized person ted above to wind up the company	or if ther 's activiti	e are no members, the signes and affairs:	nature of the person appointed and		
//			KE	ENNETH DAVIS		
	Signature	.		Printed Name		

FILING FEE: \$25.00