

L17 00000F644

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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15 FEB 20 AM 8:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Bowers FEB 26 2015

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Outdoor Faces, 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:

Stephanie Davis

(Name of Person)

Outdoor Faces, LLC

(Firm/Company)

5443 Winding Way

(Address)

Merritt Island, FL 32953

(City/State and Zip Code)

For further information concerning this matter, please call:

Kenneth Davis

(Name of Person)

at (

321

(Area Code & Daytime Telephone Number)

480-1960

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:**

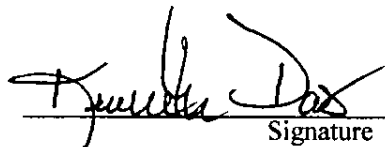
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**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  
Outdoor Faces, LLC
2. The Articles of Organization were filed on July 31, 2013 and assigned  
document number L31000108644
3. The delayed effective date the dissolution if not effective on the date of filing: N/A  
(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).  
Closing Business
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. Signature of an authorized person or if there are no members, the signature of the person appointed as  
listed above to wind up the company's activities and affairs:

  
Signature

Kenneth Davis  
Printed Name

**FILING FEE: \$25.00**

15 FEB 20 8:59  
RECEIVED  
STATE  
SECRETARY OF  
FLORIDA

FILED