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(Address)
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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

6657 AWC, 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:

AMANDA GOODMAN

(Name of Person)

GOODMAN BREEN & GIBBS

(Firm/Company)

3838 TAMIAMI TRL N STE 300

(Address)

NAPLES, FL 34103

(City/State and Zip Code)

For further information concerning this matter, please call:

AMANDA GOODMAN

239

403-3000

(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 com 6657 AWC, LLC	pany is
document number L130001286	filed on SEPTEMBER 11, 2013 and assigned s48 Solution if not effective on the date of filing:
4. A description of occurrence that re- 605.0707, Florida Statutes, (copy 60	sulted in the limited liability company's dissolution pursuant to section
5. If there are no members, enter the ractivities and affairs:	name and address of the person appointed to wind up the company's
6. Signature of an authorized person of above to wind up the company's activ	or if there are no members, the signature of the person appointed and listed ities and affairs: Printed Name
Melle	KENNETH D. GOODMAN, MANAGER

FILING FEE: \$25.00