13000142124		
(Requestor's Name) (Address) (Address)	900428168699	
(City/State/Zip/Phone #)	04/22/2401031004 **25.00	
Certified Copies	AND	

COVER LETTER

. . . .

TO: Registration Section Division of Corporations

SUBJECT: CATS MEON (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:

Carol Anne Thompson (Firm/Company) 6863 Proctor Rd. (Address) Tallahassee, FL 32309 (City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person) at (850) 545-3159 (Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

X \$25.00 Filing Fee and Certificate of Dissolution

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 □ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is CATS MEOW, LLC

2.	The Articles of Organization were filed on	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 <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing listed as the document's effective date on the Department of State's records.	document is received for filin requirements, this date with the second s	ig) B not be
4.	A description of occurrence that resulted in the limited liability company's di 605.0707, Florida Statutes, (copy 605.0707 on back cover letter). CEASED CONDUCTING BUSINESS IN FLORIDA	ssolution pursuant to se	
			6411

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: CAROL A. THOMPSON

6863 PROCTOR ROAD

TALLAHASSEE, FL 32309

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

Bard A.S moson

CAROL A. THOMPSON

Printed Name

FILING FEE: \$25.00