

L13000166379

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

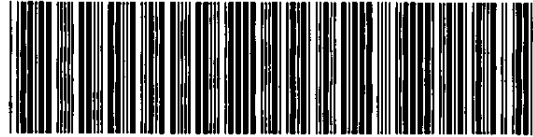
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14 JUN -3 PM 3:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUN - 9 2014

T. BROWN

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Westside Liquidators 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:

Lynn Adams  
(Name of Person)

It's Your Money, Inc.  
(Firm/Company)

2768 SR A14 # 308  
(Address)

Atlantic Beach, FL 32233  
(City/State and Zip Code)

For further information concerning this matter, please call:

Lynn Adams at ( 904 ) 270-2876  
(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

FILED  
14 JUN -3 PM 3:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Westside Liquidators LLC

2. The Articles of Organization were filed on 12/5/2013 and assigned

document number L13000166379

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).

Corporation changed it's tax structure  
From an LLC to a sub chapter  
S Corporation.

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

Gary D. Combs  
2559 Brockview Pointe  
Orange Park, FL 32073

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:

Gary D. Combs  
Signature

GARY S Combs  
Printed Name

FILING FEE: \$25.00