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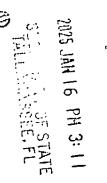
(Requestor's Name)		
(Address)		
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PICK-UP WAIT MAIL		
(Business Entity Name)		
(D.)		
(Document Number)		
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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: 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:		
PATRICIA PLUMMER (Name of Person)		
(Firm/Company)		
3104 SWAPS TRAIL		
JALLANASSEE FL 32309 (City/State and Zip Code)		
For further information concerning this matter, please call:		
(Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount:		
Enclosed is a check for the following amount:		
XJ \$25.00 Filing Fee and Certificate of Dissolution	□ \$55.00 Filing Fee. Certificate of Dissolution.& □ □ Certified Copy (additional copy is enclosed) □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	
Mailing Address:	Street Address:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	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
D.M YERTRIOUE, LLC
2. The Articles of Organization were filed on 12 0 20 13 and assigned
document number <u>L13000169136</u>
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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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).
The IC WAS created for a specific purpose
and it was not intended to be AN engoing business
recation. Furthermore, I Am retiring DM. Vertrout
to explore other opportunities.
5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs:
3104 SWADS TRAIL
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:
Signature Printed Name
THE INC. FEED COATE OF

FILING FEE: \$25.00