

L14000002061

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

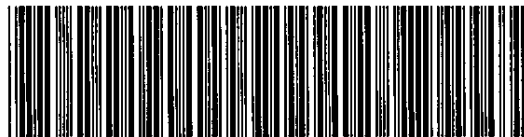
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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Susan Lincilome, 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:

Susan Lincilome
(Name of Person)

Susan Lincilome, LLC
(Firm/Company)

2047 Owenby Drive
(Address)

Tallahassee, FL 32308-
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Susan Lincilome at (850) 510-1890
(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 company is

Susan Lincicome, LLC

2. The Articles of Organization were filed on 1/6/2014 and assigned
document number L14 000002061

3. The delayed effective date the dissolution if not effective on the date of filing: Date of 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).

Pending contracts did not materialize -
no business 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:

Susan Lincicome
2017 Owenby Dr.
Tallahassee, FL 32308-1337

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

Susan Lincicome

Susan Lincicome

FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA