## C140000 11948

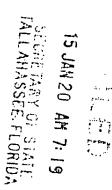
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Ви	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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## COVER LETTER : •

TO: Registration Section Division of Corporations		
SUBJECT: West Bend South, L.L.C. (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:		
Trease retain an correspondence concerning and matter to the rollowing.		
Tim Saviello (Name of Person)		
(Name of Person)		
West Bond South, LLC. (Firm/Company)		
3621 VW 415+ pl. (Address)		
Gainesville, FL 32605 (City/State and Zip Code)		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
True Souloth 4/64 236-9170		
Tim Savielb at (164) 236-9170 (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: STREET/COURIER ADDRESS:		

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## . ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

i.	The name of a limited liability company is			
	Wost Bond South, talle.			
2.	The Articles of Organization were filed on $1-9-19$ and assigned document number $000 \lambda 54910770$			
	document number			
3.	The delayed effective date the dissolution if not effective on the date of filing:			
	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).			
	Completed the Subiness Transaction Which was The			
	Completed the Subiness Transaction Which was The purpose of the Curp.			
	<u> </u>			
5.	If there are no members, enter the name and address of the person appointed to wind up the company's			
	activities and affairs:			
	75 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5			
	S 20 9			
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs:			
<	Timothy R. Saviello Printed Name			
	Signature Printed Name			

**FILING FEE: \$25.00**