

U4000013884

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

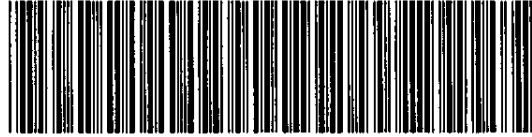
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2015 FEB 17 PM 4:04  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FEB 20 2015  
J. BRUCE

EFFECTIVE DATE

03/01/15

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: G Grant 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:

Richard J. Maas

(Name of Person)

(Firm/Company)

3015 Lake Butler Ct

(Address)

Cape Coral, FL 33909

(City/State and Zip Code)

For further information concerning this matter, please call:

Richard J. Maas

(Name of Person)

609

at (

335-9426

(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

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TALLAHASSEE FLORIDA  
SECRETARY OF STATE

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is  
G Grant LLC

2. The Articles of Organization were filed on Jan 27, 2014 and assigned  
document number L14000013884

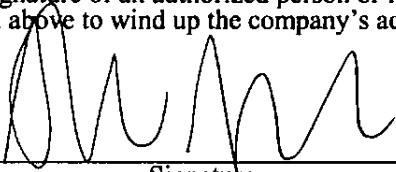
3. The delayed effective date the dissolution if not effective on the date of filing: March 1, 2015  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

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).

Ceased operation

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

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

Richard J. Maas

Printed Name

**FILING FEE: \$25.00**

2015 FEB 17 PM 4:04  
STATE OF FLORIDA  
HALL COUNTY CLERK

FILED

EFFECTIVE DATE

03/01/15