LI4000019ILI

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(City/State/Zip/Phone #)		
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	<u> </u>
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COVER LETTER

Division of Corporations	
SUBJECT: Prime T;	me Leasing LiLC
(Name of Limited I	Jiability Company)
The enclosed Articles of Dissolution and fee(s) are submitted	for filing.
Please return all correspondence concerning this matter to the	following:
Michael DeMa	r. · c
Prime Time	f Person) Ompany)
2500 Mealow	brook Pkwy Ste D
Duth, GA (City/State a	30096 nd Zip Code)
For further information concerning this matter, please call:	
M	_at (<u>770</u>) <u>310-32</u> (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

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 Prime Time Leaving LLC.
2.	The Articles of Organization were filed on $\frac{2/3}{4}$ and assigned
	document number <u>L/40000/9</u> /6/
3.	The delayed effective date the dissolution if not effective on the date of filing: 5/23/7 (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). M:s F: e S as a FL LLC + Shoule
	have Fled as a Fore in antity - Ferrica Entity
	paperwork of this probet
5.	If there are no members, enter the name and address of the person appointed to wind up the company
	activities and affairs: Michael Demaria
	4735 Bramble Rose Ln
	Suwaper 6A 30024
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:
	Mille Marie Michael Maria

FILING FEE: \$25.00