114000032017

(Requestor's Name)			
(A	address)		
<u> </u>	Address)		
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates	of Status	
Special Instructions to Filing Officer:			

Office Use Only



800273320168

05/28/15--01004--023 **25.00

LO MATZK TOLZ: 28 SEURETARY OF STATE ALLAHASSEE, FLORID)

MAY 2 9 2015

T. BROWN

• COVER LETTER

TO: Registration Section Division of Corporations	the second second			
SUBJECT: Creative Marketing S (Name of Limit	itralegies LLC ted Liability Company)			
The enclosed Articles of Dissolution and fee(s) are submitted Please return all correspondence concerning this matter to				
Faye Nicolette (Nam	me of Person)			
(Fin	rm/Company)			
534 Laurel Hill	(Address)			
Lakeland, FL 33813 (City/State and Zip Code)				
For further information concerning this matter, please call:	:			
Faye Nicolette (Name of Person)	at (727) 212-7105 (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 &			

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 liabil	ity company is	TEST CONTRACTOR
Cleative Marke	eting Strategies, LLC	
	n were filed on February 25,20	and assigned
document number	100032617	•
(effective Note: If the date inserted in the	he dissolution if not effective on the date date cannot be prior to or more than 90 days later his block does not meet the applicable statuto tive date on the Department of State's records	than date document is received for filing) ory filing requirements, this date will not be
4. A description of occurrence 605.0707, Florida Statutes, (that resulted in the limited liability comp copy 605.0707 on back cover letter).	pany's dissolution pursuant to section
No longer in be	osiness. Sales not strong	enough to continue
operahon,		
5. If there are no members, ent	er the name and address of the person ap	pointed to wind up the company's
activities and affairs:	Fone Nicolette	
	534 Laurel 14(1)	
,	Laxeland, FL 33813	
6. Signature of an authorized p listed above to wind up the con	person or if there are no members, the sign apany's activities and affairs:	nature of the person appointed and
Paye of Neight Signature	- Fame 1	Louise Nicolette Printed Name

FILING FEE: \$25.00