1400032678

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

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations

Pattern Welded Films, LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for tiling.

Please return all correspondence concerning this matter to the following:

Nadia A. Havard (Name of Person) Knox McLaughlin Gornall & Sennett, PC. (Firm/Company) 120 West 10th Street (Address) Erie PA 16501

(City/State and Zip Code)

For further information concerning this matter, please call:

Timothy R. Larson

(Name of Person)

(Area Code & Davtime 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
	Pattern Welded Films, LLC
2.	The Articles of Organization were filed on February 26, 2014 and assigned
	ocument number <u>L14000032678</u>
3.	'he delayed effective date the dissolution if not effective on the date of filing: (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 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 05.0707, Florida Statutes, (copy 605.0707 on back cover letter).
	the consent of all the members.
_	2110 DEC
	f there are no members, enter the name and address of the person appointed to wind up the company's ctivities and affairs:
6. list	lignature of an authorized person or if there are no members, the signature of the person appointed and d above to wind up the company's activities and affairs:
	Timothy R. Larson
	Signature Printed Name

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: Pattern vveided Films, LLC	
Document number of Limited Liability Company is: L14000032678	
Date of dissolution was: 12/31/2018	
Description of information that must be included in a written claim:	
name, address and the phone number of the cred	litor, the
date of the original debt, the amount of the claim,	the reason
for submitting the claim, a written document evide	
original debt.	EC 1
Mailing address where claims can be sent: (Claims cannot be sent to the Division of	Corporations)
707 Teal Avenue	
Celebration, FL 34747	-
	

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00

Signature of the Person Filing

A claim against the above named limited liability company will be barred unless a proceeding to enforce the

claim is commenced within 4 years after the filing of this notice.

Printed Name of the Person Filing

Timothy R. Larson