

L14000033541

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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16 MAY -9 PM 2:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 10 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Native Contracting and Ventures 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:

Gail Martell

(Name of Person)

Native Contracting and Ventures LLC

(Firm/Company)

414 Coconut Drive

(Address)

Key Largo, Florida 33037

(City/State and Zip Code)

For further information concerning this matter, please call:

Gail Martell

(Name of Person)

at (305) 853-5885

(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

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

1. The name of a limited liability company is

Native Contracting & Ventures LLC

2. The Articles of Organization were filed on February 26, 2014 and assigned

document number L 14000033541

3. The delayed effective date the dissolution if not effective on the date of filing: April 28, 2016
(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).

agreed partnership dissolution due to age and health challenges

Gail Martell and Paul Patterson agreement

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

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

Gail Martell

Printed Name

FILING FEE: \$25.00

10 MAY -9 PM 2:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED