

L14000058956

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

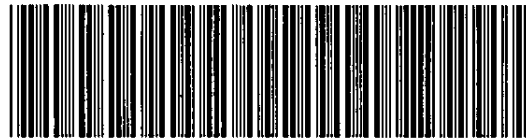
(Business Entity Name)

(Document Number)

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2014 JUN 23 PM 1:45
CLERK OF SUPERIOR COURT
ALABAMA

JUN 24 2014

J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Valuefieds 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:

Jefferson Williams
(Name of Person)

Valuefieds LLC.
(Firm/Company)

13108A Thomasville Circle, FL.
(Address)

Tampa, FL. 33617
(City/State and Zip Code)

For further information concerning this matter, please call:

Jefferson Williams at (727) 385-2125
(Name of Person) (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, FL
CLERK OF SUPERIOR COURT

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

1. The name of a limited liability company is

Valuefieds LLC.

2. The Articles of Organization were filed on April 8, 2014 and assigned

document number L14000058950

3. The 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)

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).

Not an adequate amount of company
Capital remained sufficient to keep
Co. up and running. All members voted to
dissolve the partnership.

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

Jefferson Williams
Printed Name

FILING FEE: \$25.00

2014 JUN 23 11:46
FLORIDA STATE
RECORDS & ADMINISTRATION