

L14000062134

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

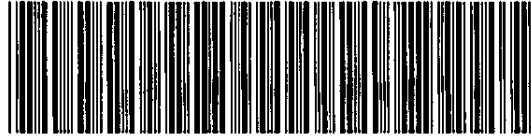
(Business Entity Name)

(Document Number)

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CLERK OF STATE
TALLAHASSEE FLORIDA

MAR 30 2015
J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Centry Group 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:

Carlos Gutierrez.
(Name of Person)

(Firm/Company)

P.O. Box. 420915
(Address)

Lake Monroe FL. 32747
(City/State and Zip Code)

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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For further information concerning this matter, please call:

Carlos Gutierrez at (407) 508-2013
(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

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

1. The name of a limited liability company is

Centex Group. LLC.

2. The Articles of Organization were filed on April 14 2014 and assigned

document number L140000 62134

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 enough. Client base.

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

Carlos Gutierrez

P. O. BOX. 470915

LAKE MONROE, FL 32747

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

Carlos Gutierrez
Printed Name

FILING FEE: \$25.00

2015 MAR 11 PM 3:05
CLERK OF DISTRICT COURT
TALLAHASSEE FLORIDA

FILED