

L140000 74147

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

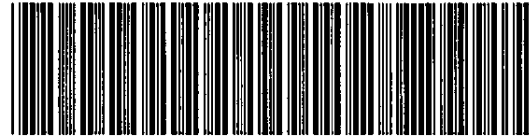
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300263399423

09/26/14--01013--011 \*\*25.00

FILED  
14 SEP 26 AM 10:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Chelsea Wholesale  
(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:

Abed ASker

(Name of Person)

Chelsea Wholesale

(Firm/Company)

6735 Conroy Windermere Rd Suite 420

(Address)

Orlando FL 32724

(City/State and Zip Code)

For further information concerning this matter, please call:

Abed ASker

(Name of Person)

at (386) 956 1516

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

X

\$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

Chelsea Wholesale

2. The Articles of Organization were filed on May 07 2014 and assigned

document number L14000074143

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).

Business had no activity

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

Abed Asker 506 Birch Oakway Deland FL 32724

Ramsey Patten 5809 Leopardstown Dr Tampa FL 33610

6. Signature of an authorized person or if there are no members, the signature of the person appointed listed above to wind up the company's activities and affairs:

Abed Asker  
Signature

Abed Asker  
Printed Name

**FILING FEE: \$25.00**

14 SEP 26 AM 10:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED