## L14000077947

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
. (Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



900266506989

11/14/14--01004--003 \*\*25.00

THE PH LE 25

SECRETARY OF STATE
ACLIANASSEE, FLORIDA

F Buren NOVEL SOLL

## **COVER LETTER**

TO:

TO:		tion Section of Corporations				
SUBJE	CE CE	NTRIX SYSTEMS, LLC				
SUBJE	.cr:	(Name of Limite	ed Liability Company	)		
		cles of Dissolution and fee(s) are submitt	-			
		RICHARD A BOYKO, EA	, and the second			
	(Name of Person)					
	WHITE DOVE BUSINESS & FINANCIAL SERVICES, INC.					
	(Firm/Company)					
		11720 US HWY 19, SUITE 6				
		(,	Address)			
	1	PORT RICHEY, FL 34668				
		(City/Star	te and Zip Code)			
For fur	her inform	nation concerning this matter, please call:				
	RICHA	ARD A BOYKO, EA	727 at (	861-2722		
		(Name of Person)		e & Daytime Telephone Number)		
Enclose	d is a check	for the following amount:				
7	<b>\$25.00</b> Fi	ling Fee and Certificate of Dissolution		Fee, Certificate of Dissolution & by (additional copy is enclosed)		
		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Regist Divisio Clifton	ET/COURIER ADDRESS: ration Section on of Corporations a Building Executive Center Circle		

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	ion were filed on MAY 14, 2014	and assigned
document number L140	00077947	
The delayed effective dat (effect	e the dissolution if not effective on the date we date cannot be prior to or more than 90 days later to	of filing: SEPTEMBER 1, 20 than date document is received for filing)
A description of occurrent 605.0707, Florida Statutes	ace that resulted in the limited liability comps, (copy 605.0707 on back cover letter).	any's dissolution pursuant to section
ENTITY IN CONFLIC		
		E AS
······································		200 700 700
		m m
If there are no members,	enter the name and address of the person ap	pointed to wind up the company's
activities and affairs:	RICHARD A BOYKO, EA	
	WHITE DOVE BUSINESS & FIN.	ANCIAL SERVICES, INC.
	11720 US HWY 19, SUITE 6	
	PORT RICHEY, FL 34668	
Signature of an authorize	d person or if there are no members, the sign	nature of the person appointed and

FILING FEE: \$25.00

Printed Name