

#L14000079885

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

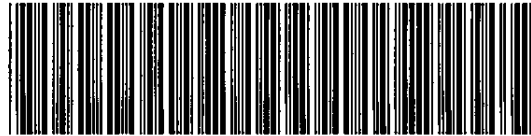
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



200261321162

06/24/14--01020--002 \*\*25.00

FILED  
2014 JUN 24 PM 3:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER

JUN 25 2014

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: RTL LAWN 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:

BRIAN Montanez  
(Name of Person)  
RTL LAWN LLC  
(Firm/Company)  
17750 Caudel Rd  
(Address)  
ORLANDO, FL 32833  
(City/State and Zip Code)

For further information concerning this matter, please call:

Barbara Montanez at (407) 545-1655  
(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

FILED

2014 JUN 24 PM 3:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

RTL LAWN LLC

2. The Articles of Organization were filed on 5/10/2014 and assigned

document number L14000079885

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).

Decided I just wanted to  
work for a company instead of  
owning my own.

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

<u>AP Montanez Barbara</u>	<u>17750 Carvel Rd</u> <u>Orlando FL</u> <u>32833</u>
<u>Ambr Montanez Julio JR</u>	
<u>AP Montanez Michael</u>	

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]  
Signature

Brian Montanez  
Printed Name

FILING FEE: \$25.00