

L14000081969

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

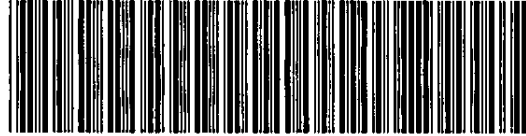
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900280746249

01/19/16--01009--007 **25.00

FILED
2016 JAN 19 P 3:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 20 2015
12:00 PM

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CORY ALLEN CONTEMPORARY ART 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:

JEFFREY HAMILTON

(Name of Person)

(Firm/Company)

1015 N.W. 164TH STREET

(Address)

EDMOND, OK 73013

(City/State and Zip Code)

For further information concerning this matter, please call:

JEFFREY HAMILTON

(Name of Person)

at 405 812-5566

(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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 JAN 19 P 3:36

FILED

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

1. The name of a limited liability company is
CORY ALLEN CONTEMPORARY ART LLC

2. The Articles of Organization were filed on MAY 21, 2014 and assigned
document number L1400081969

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)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be
listed as the document's effective date on the Department of State's records.

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).

No Longer in Use

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

1015 NW 164 St

Edmond OK 73013

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:

Jeffrey Hamilton, Manager
Signature

Jeff Hamilton, Manager
Printed Name

FILING FEE: \$25.00

FILED
2016 JAN 19 PM 36
SECRETARY OF STATE
TALLAHASSEE FLORIDA