

L14 0000 97324

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

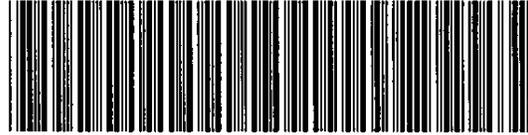
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GMA SELECT 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:

Ruth K. Inglefield
(Name of Person)

GMA SELECT LLC
(Firm/Company)

601 N. Eutaw St. Apt. 220
(Address)

Baltimore, MD 21201
(City/State and Zip Code)

For further information concerning this matter, please call:

Ruth K. Inglefield at (410) 343-1661
(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
GMA SELECT LLC

2. The Articles of Organization were filed on June 17, 2014 and assigned
document number L14000097324

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).
This is a one-person company. I planned to become an online reseller.
Shortly after incorporating my regular job status changed. I will no longer have
any time to run an online business.
This company never conducted any business.

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: Ruth K. Inglefield
601 N. Eutaw St. Apt. 220
Baltimore, MD 21201

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

Ruth K. Inglefield
Printed Name

FILING FEE: \$25.00

7/23/14

14 JUL 28 AM 11:10
STATE OF FLORIDA
SECRETARY OF STATE