#[14000106466

(Re	equestor's Name)		
(Ad	ldress)		
(Ad	ldress)		
(Cii	ty/State/Zip/Phone	· #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			

Office Use Only



700275773147

08/06/15--01015--013 **25.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

2015 AUG -6 PH 12: 1

K.SALY EXAMINER AUG 1 0 2015

COVER LETTER

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
2015 AUG-6 PM 12: 15
SECRETARY OF STATE

1.	The name of a limited liability company is Coher Coine Guard. Lt. C. IAECRETARY	
	The Articles of Organization were filed on 15 May 2014 and assigned	
	AMASSEE. FLOSIE	
2.	The Articles of Organization were filed on	
	document number <u>L14000106</u> 466	
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).	
	Company Inactive from 15 May 2014 to present. No business don	l.
5.	If there are no members, enter the name and address of the person appointed to wind up the company's	
	activities and affairs: John Abacan	
	Miramor F1. 33027	
	Miramor Fl. 33027	
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:	
	John Clare Signature Printed Name	
	Signature Printed Name	

FILING FEE: \$25.00