1/4000/0930/

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



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K.SALY EXAMINER AUG 19 2015

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: DOUBLEMY FINANCIAL 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:		
PATRICIA DOUGHERTY		
(Name of Person)		
(Firm/Company)		
712 S. 14TH STREET		
(Address)		
LEESBURG FL 34748		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
PATRICIA DOUGHERTY at 352, 988-3508		
(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

AKTICLES OF DISSOLUTION FOD
FOR A LIMITED LIABILITY COMPANY F// F
1. The name of a limited liability company is DOUGHERY FINANCIAL LLC SECRETARY OF STATE ALIMITED LIABILITY COMPANY 1. The name of a limited liability company is O7-10-20H and assigned ALIMITED LIABILITY COMPANY ALIMITED LIABILITY COMPANY FILED ALIMITED LIABILITY COMPANY ALIMITED LIABILITY COMPANY
2. The Articles of Organization were filed on $\frac{O'/-10-2014}{ORID}$ and assigned
document number
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). BUSINESS NEVER INIATED OR CONDUCTED
5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: PATO 1014 DATO HERM
MAC WHILCH
112 S. HIH SIREL
LEESBURG FLORIDA 34748
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:
JOSEPH DOUGHERTY
Signature Printed Name FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: Dougherty Francia LLC
Document number of Limited Liability Company is: L1400010930/
Date of dissolution was: <u>04-30-2015</u>
Description of information that must be included in a written claim:
BUSINESS NEVER INITIATED OR CONDUCTED
- Capti
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) PATRICIA DOUGHERY
112 S. 14TH STREET
LEESBURG E 34711
352 728-3300
A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
Printed Name of the Person Filing Signature of the Person Filing Signature of the Person Filin
Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00