## 114000/1289/

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

Office Use Only



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## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: PICK HANSON CAPPENTRY			
(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:			
RICHARD HANGON  (Name of Person)			
(Name of Person)			
(Firm/Company)			
HAVAPPE FL, 3254			
(Address)			
HAVARDE FL. 3751do			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
2 11.00 11.11.1			
PICHARD HONGON at (850, 816-9715) (Name of Person) (Area Code & Daytime Telephone Number)			
(Name of Ferson) (Area Code & Daytine Telephone Number)			
Enclosed is a check for the following amount:			
\$25.00 Filing Fee and Certificate of Dissolution			
Certified Copy (additional copy is enclosed)			
MAILING ADDRESS: STREET/COURIER ADDRESS:			
Registration Section Registration Section			
Division of Corporations Division of Corporations			
P.O. Box 6327 Clifton Building			
Tallahassee, FL 32314 2661 Executive Center Circle			
Tallahassee, FL 32301			

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is	
PICK HOHGON CAPPENTRY WC	
2. The Articles of Organization were filed on 144 17, 2014 and assignment	gned
document number L14000112891	
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  Note: If the date inserted in this block does not meet the applicable statutory filing requirement listed as the document's effective date on the Department of State's records.	
<ol> <li>A description of occurrence that resulted in the limited liability company's dissolution is 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).</li> </ol>	pursuant to section
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	7
5. If there are no members, enter the name and address of the person appointed to wind up activities and affairs:	the company &
	'
	1
	<u> </u>
6. Signature of an authorized person or if there are no members, the signature of the perso listed above to wind up the company's activities and affairs:	n appointed and
1 H RICHARD L.	HANGON
Signature Printed Name	1

FILING FEE: \$25.00