# L14000126927

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#### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Terry Sides (Name of Limited)	116
/ (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:
Terry Sid	f Person)
/ (Name o	f Person)
(Firm(C	ompany)
9400 Highland Woods B (Add Bonith Springs, A. 34) (City/State a	
Bonith Springs, A. 34	135
(City/State a	nd Zip Code)
For further information concerning this matter, please call:	
(Name of Person)	at ( 234 ) 267 6183 (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

The name of a limited liab	ility company is	
	Terry Sider LLL	
The Articles of Organizat	on were filed on August 11,	2014 and assigned
document number <u>L14</u>	000126927	
(effecti Note: If the date inserted in	the dissolution if not effective on the deduction days this block does not meet the applicable state the date on the Department of State's received.	later than date document is received for filing) atutory filing requirements, this date will not
A description of occurren	the that resulted in the limited liability c. (copy 605.0707 on back cover letter).	company's dissolution pursuant to section
No langer in		
		ALL
<u> </u>		<u>V;</u> -
		्रि. 
If there are no members, of	nter the name and address of the person	n appointed to wind up the company's
activities and affairs:	Terry Sides	
	9400 Highland Wood	ods Blud
	Unit 5306	
	Bonity Springs, Fl.	34/35
Signature of an authorized ed above to wind up the c	' /	e signature of the person appointed and
1 0'1	,	
Signature		Printed Name

**FILING FEE: \$25.00**