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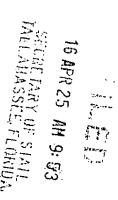
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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

Visual Landscape Design 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:

Anne Behner Coke					
(Name of Person)					
(Firm/Company)					
341 Hammocks Trail					
(Address)					
Greenacres, FL 33413					
(City/State and Zip Code)					

For further information concerning this matter, please call:

Anne Behner Coke (Name of Person) at (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 liabil	lity company is			
	Visual Landscape Design, LLC	С			•
2.	The Articles of Organization	n were filed on September	05, 2014	and assigned	
	document number L1400013	39040	-		
3.	The delayed effective date t (effective Note: If the date inserted in t listed as the document's effective	this block does not meet the	applicable statutory fili	iate document is received for	
4.	A description of occurrence 605.0707, Florida Statutes, (that resulted in the limite (copy 605.0707 on back c	ed liability company' over letter).	s dissolution pursuant t	o section
	Visual Landscape Design LLC	` • •	ŕ	v owners asked for the Vi	sual
	Landscape Design LLC to be d				
5	If there are no members, en	ter the name and address	of the person appoint	ed to wind up the com	oany≛s
٥.	activities and affairs:	Anne Behner Coke		A. E.	: 32 22
		341 Hammocks Trail		SEE F	5 11
		Greenacres, FL 33413		STATI 20KIBA	9. 53
6. lis	Signature of an authorized pated above to wind up the cor	person or if there are no mmpany's activities and affi	nembers, the signatur	e of the person appoint	ed and
	Am Falle Signature			BEHNER Inted Name	
	Jignature		1 111		

FILING FEE: \$25.00