# L14000141157

(Re	equestor's Name)	
(Ac	dress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Bu	usiness Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		
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2015 DEC 30 AM 8: 13

J. HARRIS

### **COVER LETTER**

Division of Corporations			
SUBJECT: Mid-Florda Metering & Controls LC			
(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:			
Gene Steven Scruggs (Name of Person)			
(Name of Person)			
Mid-Florida Metriny Controls LLC			
(Funicompany)			
248 Lindrole St. takeland			
(Address)			
1 1/1 1 E1 >2800			
Lakeland FL 33809 (City/State and Zip Code)			
(Chyrolaic and Exp Code)			
For further information concerning this matter, please call:			
To retail and material and matter, produce out.			
Gene Scrugs at (863) 712-5476  (Name of Person) (Area Code & Daytime Telephone Number)			
(Name of Person) at (863) 712-5476  (Name of Person) (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:			
\$25.00 Filing Fee and Certificate of Dissolution  \$\square\$ \$55.00 Filing Fee, Certificate of Dissolution & Certified Conv (additional conv is enclosed)			

#### **MAILING ADDRESS:**

TO:

Registration Section

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 liability company is	
	Mid-Florida Metering & Controls LLC	
2.	The Articles of Organization were filed on $09/10/20/4$ and assigned	
	document number <u>L1400014/157</u>	
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.	be
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).  Not people able	1
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:  Lenc Steven Scruggs Sc.  248 Lindale St.  Lakeland Ft. 3380?	
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs:	
_	Signature  FILING FEE: \$25.00  FILING FEE: \$25.00  FILING FEE: \$25.00	THE PERSON NAMED IN THE PE