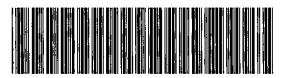
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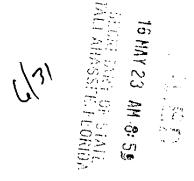
(Requestor's Name)					
	dress)				
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
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Certified Copies	_ Certificates	Certificates of Status			
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MAY 24 2016 J SHIVERS

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT

Pinch Hit Consulting, 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:

Dennis K. LeRoy
(Name of Person)
Pinch Hit Consulting, LLC
(Firm/Company)
670 Carmel Lane
(Address)
Kissimmee, FL 34759

For further information concerning this matter, please call:

Dennis K. LeRoy	630 244 6697
(Name of Person)	(Area Code & Daytime Telephone Number)

(City/State and Zip Code)

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 liability company is						
	Pinch Hit Consulting, LLC						
2.		were filed on September 25, 2014 and assigne	d				
	document number L14000150	00225					
3.	Note: If the date inserted in the	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) date inserted in this block does not meet the applicable statutory filing requirements, this date will not be 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).						
	The corporation that employed t	he services of Pinch Hit Consulting, LLC has reorganized and no lo	nger requ	ires			
	those consulting services.		52.				
				o			
			ASSE ASSE	14Y 23			
5.	If there are no members, enter	er the name and address of the person appointed to wind up the	e compa	n y s			
٠.	activities and affairs:	Dennis K. LeRoy	Sid	Ç.			
	activities and arians.	670 Carmel Lane	70 A	51			
		Kissimmee, FL 34759		<u>-</u>			
6. lis	Signature of an authorized p sted above to wind up the com	erson or if there are no members, the signature of the person a pany's activities and affairs:	ppointed	l and			
1	7. 1/1						
<u>/</u>	lilly 12000	Dennis K. LeRoy					
	Signature	Printed Name					
	\mathcal{O}	FILING FEE: \$25.00					