144000155526

| (Requestor's Name) |
|---|
| (Address) |
| (Address) _ |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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SECRETARY OF STATE STATE AND STATE STATE OF STATE

J. HARRIS

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT

See How We Run Courier and Errand Service, 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:

Charles L. Wyndham

(Name of Person)

See How We Run Courier and rrand Service, LLC

(Firm/Company)

PO Box 935

(Address)

Keystone Heights, FL 32656

(City/State and Zip Code)

For further information concerning this matter, please call:

Charles Wyndham

, 352

478-1650

(Name of Person)

(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 liability company is | s | |
|---|---|-----------|
| See How We Run Courier and Errand Service | ,LLC | |
| 2. The Articles of Organization were filed or | October 16, 2014 and assigned | |
| document number L14000155526 | | |
| 3. The delayed effective date the dissolution (effective date cannot be properties). If the date inserted in this block does relisted as the document's effective date on the | if not effective on the date of filing: March 31, 2017 rior to or more than 90 days later than date document is received for filing) not meet the applicable statutory filing requirements, this date will not Department of State's records. | be |
| A description of occurrence that resulted i 605.0707, Florida Statutes, (copy 605.070*) | in the limited liability company's dissolution pursuant to section 7 on back cover letter). | n |
| Lack of business, low revenue. | | |
| 5. If there are no members, enter the name ar activities and affairs: | nd address of the person appointed to wind up the company's | 17 APR 2L |
| | | |
| 6. Signature of an authorized person or if the listed above to wind up the company's activity | ere are no members, the signature of the person appointed and ties and affairs: | |
| Ch Nyndhan | Charles L Wyndham | |
| Signature | Printed Name | |

12**4**)

FILING FEE: \$25.00