# 114000157238

(Re	questor's Name)					
(Address)						
(Ad	dress)					
(Cit	y/State/Zip/Phone	#)				
PICK-UP	WAIT	MAIL				
(Bu	siness Entity Nam	re)				
(Document Number)						
Certified Copies	_ Certificates	of Status				
Special Instructions to Filing Officer:						
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RETARY OF STATE ALLAHASSEE, FLORIDA

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FEB 1 7 2016 -

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# **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT:	Florence E. (	Giles, LLC	<b>&gt;</b>				
(Name of Limited Liability Company)							
The enclosed A	rticles of Dissolution and fee(s) are submitte	d for filing.					
Please return all	correspondence concerning this matter to the	ne following:					
	Florence Giles						
(Name of Person)							
Florence E. Giles, LLC							
	(Firm	/Company)					
1431 SW 4th Court							
(Address)							
	Cape Coral, FL 33991						
	(City/State	e and Zip Code)	**************************************				
For further info	rmation concerning this matter, please call:						
F	lorence Giles	<sub>*(</sub> 239	247-9203				
	(Name of Person)	(Area Code	& Daytime Telephone Number)	-			
Enclosed is a che	ck for the following amount:						
□ \$25.00	Filing Fee and Certificate of Dissolution		Fee, Certificate of Dissolution &				

### **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	ity company is					
2.	The Articles of Organization	n were filed on	October 08, 2014	and assigned			
	document numberL140	00157238	****				
3.		date cannot be prior to his block does not me	or more than 90 days later than tet the applicable statutory fil	iling: February 11, 2016 date document is received for filing) ing requirements, this date will not be			
4.	A description of occurrence 605.0707, Florida Statutes, (	that resulted in the copy 605.0707 on t	limited liability company back cover letter).	's dissolution pursuant to section			
	The Limited Liability Corpor	ation was originally c	reated in order to receive fina	ancing for a residential home.			
	I am in the process of refinance	ing my personal resid	dential home located at the fo	llowing address:			
	1431 SW 4th Ct Cape Coral I	FL 33991					
	In order to obtain financing for the above mentioned property I will need to dissolve my LLC.						
5.	If there are no members, en activities and affairs:	ter the name and ad Florence Giles	dress of the person appoin	ted to wind up the company's			
		1431 SW 4th Court					
		Cape Coral, FL 33	991				
6	Signature of an outborized		o no monton the signature	- of the name annihited and			
	sted above to wind up the cor			re of the person appointed and			
1	lorence Gil	es	Florence E. Giles	20			
	Signature		Pri	nted Name			
		FILI	NG FEE: \$25.00	FEB 16 P 12: 58 PETARY OF STATE AHASSEE. FLORIDA			