

L14000176315

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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FILED
15 APR 20 PM 1:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 29 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: D SOUTH OF THE BORDER 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:

ADWAR DAWOUD

(Name of Person)

D SOUTH OF THE BORDER

(Firm/Company)

1706 MADISON STREET

(Address)

LAWTEY, FLORIDA 32058

(City/State and Zip Code)

For further information concerning this matter, please call:

SHARON HUFFSTICKLER

(Name of Person)

at (904 674-9475)

(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

D SOUTH OF THE BORDER LLC

2. The Articles of Organization were filed on NOVEMBER 14, 2014 and assigned

document number L14000176315

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)

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).

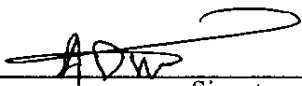
CLOSED BUSINESS

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: ADWAR DAWOUD

1672 MADISON STREET

LAWTEY, FL 32058

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:



Signature

4-15-15

Printed Name

FILING FEE: \$25.00

FILED
15 APR 20 PM 1:58
TALLAHASSEE, FLORIDA