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(Re	equestor's Name)				
(Ad	dress)				
(Ad	ldress)				
(Cit	ry/State/Zip/Phone	e #)			
PICK-UP	MAIT	MAIL			
(Bu	isiness Entity Nan	me)			
(Document Number)					
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COVER LETTER

	egistration Section Division of Corporations					
SUBJECT	FLAN CITY LLC					
		d Liability Company)				
	sed Articles of Dissolution and fee(s) are submitted	-				
	LUIS T GONZALEZ					
	(Nam	e of Person)				
	FLAN CITY LLC					
(Firm/Company)						
	12914 CATTAIL SHORE LN					
	(/	Address)				
	RIVERVIEW FL. 33579-4072					
	(City/Stat	e and Zip Code)				
For further	r information concerning this matter, please call:					
I	LUIS T GONZALEZ	813 778-9527				
-	(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 FLAN CITY LLC	company is			 ,
2.	The Articles of Organization v	were filed on 12/01/2014		_ and assigned	
	document number L1400018	33454			
3.	The delayed effective date the	dissolution if not effective the cannot be prior to or more than	on the date of filing 90 days later than date	01/01/2015 document is received for fil	ing)
4.	A description of occurrence th 605.0707, Florida Statutes, (co	py 605.0707 on back cover	bility company's di letter).	ssolution pursuant to	section
	BUSINESS INACTIVE/CI	.OSED			<u> </u>
				(SSEE	
				Jr Sp	
				RIDA	7
5.	If there are no members, enter activities and affairs:	the name and address of the	e person appointed	to wind up the compar	ny's
	-				
	-				
6. lis	Signature of an authorized per sted above to wind up the comp	son or if there are no memb any's activities and affairs:	ers, the signature of	the person appointed	and
	1 0,				
	lew Mun	LU	IS T GONZALE	·	
	Signature		Printed	Name	

FILING FEE: \$25.00