

L15000007219

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900269715089

02/23/15--01030--010 **25.00

FILED

2015 FEB 23 PM 4:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 02 2015
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lewis Oil Properties, 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:

Chuck Guinn Lewis

(Name of Person)

(Firm/Company)

P.O. Box 12663

(Address)

Pensacola, FL 32591

(City/State and Zip Code)

For further information concerning this matter, please call:

Chuck Guinn Lewis

(Name of Person)

850

at ()

512-8428

(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
Lewis Oil Properties, LLC
2. The Articles of Organization were filed on December 31, 2014 and assigned
document number L15000007219
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).
Fla. Stat. Sec. 605.0701(2) - The consent of all members of the LLC

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

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

Chuck Guinn Lewis
Printed Name

FILING FEE: \$25.00

FILED
2015 FEB 23 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA