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## **COVER LETTER**

TO: Registration Section
Division of Corporations

The DeLin Group, 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:

Donald E. Williams				
(Name of F	Person)			
(Firm/Con	npany)			
2536 S. Gravel Lane	. •/	J.VI.	<b>5</b>	
(Addre	ess)	Z S S	AON	
Flagstaff, AZ 86001		SSVI	W 23	<u> </u>
(City/State and	Zip Code)	<u> </u>		
For further information concerning this matter, please call:		STAIE LORID	PM 4:50	٠
Donald Williams	<sub>at</sub> 602	(684-0511	Ο	
(Name of Person)		le & Daytime Telephone Number)		
Enclosed is a check for the following amount:				

#### **MAILING ADDRESS:**

■ \$25.00 Filing Fee and Certificate of Dissolution

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

☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)

# ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is
	The DeLin Group, LLC
2.	The Articles of Organization were filed on and assigned
	document number L15000019311
2	The deleved effective date the discolution if not offertive on the date of filings
۶.	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)
	Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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).
	The consent of all the members
	The Consent of all the memoers
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs:
	SS 2 F
	C S C
	)A
6.	Signature of an authorized person or if there are no members, the signature of the person appointed and
{I:	sted above to wind up the company's activities and affairs:
	made Williams 1115-15 Donald E. Williams
_/	Signature Printed Name

FILING FEE: \$25.00