# L150000 19469

(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



900284691889

04/20/16--01014--018 \*\*25.00

4/29



APR 21 2016 J SHIVERS

## **COVER LETTER** \*

TO:

Registration Section
Division of Corporations

Pelican C505, 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:

Carl D Michael	
(Name of Person)	
Pelican C505, LLC	
(Firm/Company)	
6788 Sylvan Woods Drive	
(Address)	
Sanford, FL 32771	•
(City/State and Zip Code)	*

For further information concerning this matter, please call:

Carl D. Michael

<u>,</u>407

920-0492

(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 liabili	ty company is		· · · · · · · · · · · · · · · · · · ·		·
2.	The Articles of Organization	were filed on Januar	y 22, 2015	and a	ssigned	
	document number L1500001	9469				
3.	The delayed effective date the (effective Note: If the date inserted in the listed as the document's effective date that the content of the notation of the content of the	nis block does not meet	the applicable sta	tutory filing requirem	i is icccited for	filing) will not be
4.	A description of occurrence 605.0707, Florida Statutes, (	that resulted in the li	mited liability cock cover letter).	ompany's dissolution	on pursuant to	section
	No longer an active business		,			
_	If the second content of the second content		ogg of the porce	n appointed to wind	يند اين the chivin	
5.	If there are no members, ent activities and affairs:	er the name and addit Carl D. Michael, 678	=			—————————————————————————————————————
	activities and arrairs.				ASSE ANNIA	
					RIDA	
6. lis	Signature of an authorized p sted above to wind up the con	erson or if there are nonpany's activities and	no members, the l affairs:	signature of the pe	rson appointe	ed and
	Carl DM	rhael	<u>C</u> a,	r/ D M.	chael	<b>,</b>

**FILING FEE: \$25.00**