15000020973

| (Requestor's Name) | - |
|---|---|
| , , , | |
| (Address) | - |
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| (Address) | _ |
| (City/State/Zip/Phone #) | - |
| PICK-UP WAIT MAIL | |
| | |
| (Business Entity Name) | - |
| · | _ |
| (Document Number) | |
| Certified Copies Certificates of Status | _ |
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| Special Instructions to Filing Officer: |] |
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TENAY 21 PM 2: 06
SECRETARY OF STATE
ALLARY SEEF FLORIO.

FW 22 2015

T. HAMPTON

COVER LETTER

TO:

Registration Section Division of Corporations

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

J. SALVAGIO GALLOPING GOURME

For further information concerning this matter, please call:

PETER J SALVA610 2000 is a check for the 6"

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

239-549 7779

□ \$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 GALLOPING GOURMET LLC. |
|---|
| 2. The Articles of Organization were filed on $01/27/2015$ and assigned |
| document number <u>L 1.5000020973</u> |
| 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 fo) 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). |
| unable to create enough revenue to make a profit |
| 5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: PETERT SALVAGIO |
| 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: |
| Astro Salvageo PETER J SALVAGIO Printed Name |
| FILING FEE: \$25.00 |