## 11500039452

(Re	equestor's Name)		
(Ad	idress)		
(Ac	ldress)		
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	isiness Entity Nar	ne)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



000285106420

04/29/16--01027--004 \*\*25.00

MIN APR 29 P 12: 51

NAK O C. SE. S.

## **COVER LETTER**

Division of Corporations		
SUBJECT: Extentions LLC (Name of Limited		
(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	e following:	
James Morwood,	∫ <sub>I</sub> . of Person)	
Extentions, LLC	Company)	
249 Redbud La	立かと idress)	
249 Redbud La (Ad Palatka, FL 32 (City/State	177 and Zip Code)	
For further information concerning this matter, please call:		
(Name of Person)	at (38L) 329-0944 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
\$25.00 Filing Fee and Certificate of Dissolution	S55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)	1
MAILING ADDRESS:	STREET/COURIER ADDRESS: 💆	ी. इन्युम्प
Registration Section	Registration Section	g i i
Division of Corporations	Division of Cornerations	نسا
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is
	Extentions, LLC
2.	The Articles of Organization were filed on $M_{2rch}$ 4, 2015 and assigned
	document number <u>L 15000039652</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 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).  Did not conduct zny bussiness in the Nezr furture.
	Will not conduct any bussiness in the Near furture.
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:    James Northwood   Jr 249 Relbud Lave     Palatka, FL 32177
	<u> </u>
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs:
P	Signature James Norwood In Signature Printed Name
	FILING FEE: \$25.00
	CRICA CRICA