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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	:#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		





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COVER LETTER

SUBJECT:		DEWYWS VVC d Liability Company)	**********
	· ·		
The enclosed Article	es of Dissolution and fee(s) are submitte	ed for filing.	
Please return all cor-	respondence concerning this matter to the	he following:	
	JEFFREY M) (Name	e of Person)	
_	GHUL SPORTS (Firm	OUGNUS UV (Company)	with a state of the state of th
		D EIDST CARLE	15 EUS
<u></u>	LEUELUL AURES (City/State	FL 33973 and Zip Code)	8 77 07
For further informat	ion concerning this matter, please call:		To Gir
	(Name of Person)	at (914) 315 1447 (Area Code & Daytime Telephone Number)	
Enclosed is a check fo	r the following amount:		
□ \$25.00 Filin	g 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 Contact:

Jeffrey Millett

Address:

2124 Oxford Ridge Circle

Lehigh Acres, FL. 33973

Tel:

(914) 325 7447

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ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is
	WHUL SPORTS DENEMBERS
2.	The Articles of Organization were filed on \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	document number
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 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).
	Company so conside functionaling.
	
	739 C: G2
5.	If there are no members, enter the name and address of the person appointed to wind up the company
	activities and affairs: UEFFEY MULTI
	 ص
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:
	JEFFERY MILITATE
	Signature Printed Name
	FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

Printed Name of the Person Filing

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a

voluntary dissolution. Name of Limited Liability Company: GWV SPORTS OFICINGLY WC Document number of Limited Liability Company is: WU: 41-3417012 Description of information that must be included in a written claim: COMPANY NO VONKE FUNCTIONING. Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) DEFORD PLAKE LIPLLE LEYETKY NORTS, FL 33973 A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Fee: No charge if included with Articles of Dissolution. Af filed separately \$25.00

Signature of the Person Filing