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COVER LETTER

TO:

Registration Section

Division of Corporations	
SUBJECT: MCCot Paring A (Name of Limited)	nd Pressure (1 Charing Liability Company)
The enclosed Articles of Dissolution and fee(s) are submitted	for filing.
Please return all correspondence concerning this matter to the	following:
(Name o	of Person)
(Firm/C	Company)
MATH'S (Ad LATE WORTH G (City/State of	dress) 44 - 33461 and Zip Code)
For further information concerning this matter, please call:	
(Name of Person)	at (S61-) 856-6768 (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 liability com	pany is And Pressure Clemens
2. The Articles of Organization were f	iled on MARCH 25 2015 and assigned
document number 15000	
3. The delayed effective date the disso (effective date cannot Note: If the date inserted in this block listed as the document's effective date	olution if not effective on the date of filing: 8.12.3018 not be prior to or more than 90 days later than date document is received for filing) to does not meet the applicable statutory filing requirements, this date will not be on the Department of State's records.
4. A description of occurrence that res 605.0707, Florida Statutes, (copy 60	sulted in the limited liability company's dissolution pursuant to section 05.0707 on back cover letter).
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5. If there are no members, enter the nactivities and affairs:	name and address of the person appointed to wind up the company's
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\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	tre WORTH FLA 37461
6. Signature of an authorized person of listed above to wind up the company's	or if there are no members, the signature of the person appointed and activities and affairs:
Man Moley	Alan McCor
Signature	Printed Name

FILING FEE: \$25.00