

L150000056399

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 JAN 11 PM 4:27

K. SALY

JAN 11 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **COUNTY LINE GUN AUCTIONS, 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:

SHAWN L. WILES

(Name of Person)

COUNTY LINE GUN AUCTIONS, LLC

(Firm/Company)

3410 FUTCH ROAD

(Address)

PLANT CITY, FL 33566

(City/State and Zip Code)

For further information concerning this matter, please call:

SHAWN L WILES

(Name of Person)

at (**813**) **473-3296**

(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**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 JAN 11 PM 4:27

1. The name of a limited liability company is
COUNTY LINE GUN AUCTIONS, LLC

2. The Articles of Organization were filed on MARCH 31, 2015 and assigned
document number L150000056399

3. The delayed effective date the dissolution if not effective on the date of filing: DECEMBER 28, 2017
(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).
OWNER NO LONGER WISHES TO OPERATE BUSINESS.

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: SHAWN L. WILES

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:

Shawn L. Wiles
Signature

Shawn Lynn Wiles
Printed Name

FILING FEE: \$25.00