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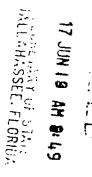
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## **COVER LETTER**

TO:

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

SUBJECT: Pear Frontier 33 (Name of Limited Liability Company)
(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:
John D. Gidoons (Name of Person)
Name of Person)
Mean Frontier 53 C
C Trime on pany
12521 Cold Stream Dr. # 508
(Address)
Fort Myers FL 339/2 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Tohn D. C. books at (401) 752-4900 (Area Code & Daytime Telephone Number)
(Name of Ferson) (Area Code & Daytine Telephone Namoer)
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)
· ·
MATERIA ANNO CONTRACAMENTO ANNO CO
MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section
Division of Corporations 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
	Mear Frontier
2.	The Articles of Organization were filed on $\frac{5}{14/2617}$ and assigned
	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 tiling)  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).
	to do anything with it. Nothing III &
5.	If there are no members, enter the name and address of the person appointed to wind up the compare's
	activities and affairs: John D. Qibbons  12521 Cold Stream Dr. #508  Ford Myers. FL 33912
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:
	Signature Printed Name
	FILING FEE: \$25.00
	\\