L150001291168

(Reque	stor's Name)	
(Addres	55)	
(Addres	ss)	
(City/Si	tate/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Busine	ess Entity Name)	
(Docum	nent Number)	
Certified Copies	Certificates of	Status
Special Instructions to Filir	ng Officer:	

Office Use Only



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S. WARREN AUG 2 8 2017



July 6, 2017

WILLIAM H YUEN 6801 COLLINS AVENUE, SUITE 1207 MIAMI BEACH, FL 33141

SUBJECT: SAW MILL CAP LLC Ref. Number: L15000129168

We have received your document for SAW MILL CAP LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION - INC, but your entity is a LIMITED LIABILITY COMPANY - LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 617A00013710

Stacey M Warren Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	CT: Saw Mill Cap					
	(Name of Limited Liability Company)					
The enc	closed Articles of Dissolution and fee(s) are submitted fo	r filing.				
Please re	return all correspondence concerning this matter to the fo	llowing:				
	William (Name of I	4 Euer				
Saw Mill Cap LCC (Firm/Company)						
	(Firm/Cor	npany)				
	6801 Collin	s Avenue #1207				
	Miami Beach	, FL 33141				
	(City/State and	Zip Code)				
For furtl	ther information concerning this matter, please call:					
	William H Yven	at (203) 273 - 0088 (Area Code & Daytime Telephone Number)				
	(Name of Person)	(Area Code & Daytime Telephone Number)				
Enclosed	d is a check for the following amount:					
	S25.00 Filing Fee and Certificate of Dissolution Server	□ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)				
	MAILING ADDRESS:	STREET/COURIER ADDRESS:				
	Registration Section	Registration Section				
	Division of Corporations P.O. Box 6327	Division of Corporations 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 Saw Mill Cap LLC
2.	The Articles of Organization were filed on July 29, 2015 and assigned
	document number <u>L 15 000129168</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).
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Not Applicable.
	Sole Member (William H. Yuan) disolving uc
	disolving ccc
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:
	Signature William H Euren Printed Name
	Signature Printed Name

FILING FEE: \$25.00

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