# 45000/55015

(Re	questor's Name)					
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	s of Status				
Special Instructions to Filing Officer:						
		,				





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09/06/16--01018--005 \*\*25.00

16 SEP -6 AM 8:56

SEP (1.9 2016)

### **COVER LETTER**

TO:

Registration Section **Division of Corporations** 

# Blade King Lawn & Landscaping, 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:

	(Name of Person)
	(Firm/Company)
1599 Chancello	r Ct.
	(Address)
Clermont, FL. 3	4711
(0	City/State and Zip Code)

For further infor

## Gerard Reynolds

(Name of Person)

(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 liabi	lity company is			
	Blade King Lawn & Landsca	ping, LLC			
2.	The Articles of Organization	on were filed on 9-10-20	015	_ and assigned	
	document number L150001	55015	<u> </u>		
3.		this block does not meet t	the applicable statutory filing	document is received for	
4.	A description of occurrence 605.0707, Florida Statutes,	e that resulted in the lin (copy 605.0707 on back	nited liability company's d k cover letter).	issolution pursuant to	section
	I also own another company th	• • • • • • • • • • • • • • • • • • • •	•	ig Lawn & Landscaping	g,
5.	the LLC.  If there are no members, enactivities and affairs:				
		1599 Chancellor Ct.			
		Clermont, Fl. 34711			16 SEP
			· · · · · · · · · · · · · · · · · · ·	- S.B. (	ر <u>د</u> الم
6. lis	Signature of an authorized sted above to wind up the co	person or if there are no mpany's activities and a )	o members, the signature o affairs:	f the person appointed	යා යා
1	Skeynoch		Gerard Reynolds	3>	on .
7	U Signature		Printed	l Name	

**FILING FEE: \$25.00**