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### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT:

# COTTAGE INN OF WEST PALM LLC

SUBJECT:

(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:

ROHIT MALL		
(Name of Person)		
COTTAGE INN PIZZA		
(Firm/Company)		
39550 WEST 14 MILE RD		
(Address)		
COMMERCE TOWNSHIP, MI 48390		

(City/State and Zip Code)

For further information concerning this matter, please call:

ROHIT MALL

...248

679-6478

(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 liability company is		
	COTTAGE INN OF WEST PA	ALM LLC	
2.	The Articles of Organization	were filed on FEBRUARY 3, 2016 and assigned	
	document number L1600002	3244	
3.	Note: If the date inserted in t	ne dissolution if not effective on the date of filing: APril 15, 3017 date cannot be prior to or more than 90 days later than date document is received for filing) nis block does not meet the applicable statutory filing requirements, this date will not be ive 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	
	•	copy 605.0707 on back cover letter).  D UNDER. BUSINESS NOVER OPENED.	
		000000 1.0.00	
		·	
-			
	If there are no members, ent activities and affairs:	er the name and address of the person appointed to wind up the company's ROHIT MALL	
		39550 WEST 14 MILE RD	
		COMMERCE TOWNSHIP, MI 48390	
6. lis	Signature of an authorized pattern above to wind up the con	erson or if there are no members, the signature of the person appointed and appany's activities and affairs:	
	DELTHOR	DL ROHIT MALL	
	Signature	Printed Name	

**FILING FEE: \$25.00**