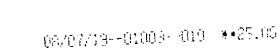
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(Requestor's Name)
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SECRETARY OF STATE

ANG 1° 2019

COVER LETTER

Division of Corporations
SUBJECT: DAd'S Crazy Worm FARM, LLC (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:
Malle P 20. World
Mare of Person)
DAD'S CAZY WORL FARM LLC
(into Conquary)
1214 8th AVE. (Address)
(Address)
Lahigh Acros Fl. 33977
Lehigh Acres, F1. 33972 (City/State and Zip Code)
For further information concerning this matter, please call:
Name of Person) (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee and Certificate of Dissolution
Certified Copy (additional copy is enclosed)
MAILING ADDRESS: STREET/COURIER ADDRESS:

TO:

Registration Section

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

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
	DAds Crazy Work FARM, LLC
2.	The Articles of Organization were filed on $\frac{\text{Feb}}{8}$, $8^{\frac{11}{12}}$ - $\frac{20}{6}$ and assigned
	document number <u>L 16 00 00 26585</u>
3.	The delayed effective date the dissolution if not effective on the date of filing: 6-5-19 (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).
	CAN'T get WORKS TO grow,
	Worns Keap dying OFF.
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
	1214 BTM AVE.
	Lehigh Acres, FI. 339720
	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:
	MARK R. WAybright Signature Printed Name
	Signature Printed Name

FILING FEE: \$25.00