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O SIMMONS JAN 25 2017

## **COVER LETTER**

TO: Registration Section Division of Corporations	1 to
SUBJECT: CL2H. (Name of Limited	Liability Company)
The enclosed Articles of Dissolution and fee(s) are submitted	d for filing.
Please return all correspondence concerning this matter to the	e following:
Amanda J (Name	FOX of Person)
(Firm/	Company)
1497 Upsh	aw Ter ddress)
Port Charlotte, F	L 33952 and Zip Code)
For further information concerning this matter, please call:	
Auanda Fox (Name of Person)	at (941) 875-5347 (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 CC2H. COM	
2.	The Articles of Organization were filed on 2   11   10 and assigned	
	document number <u>L16000029426</u>	
3.	The delayed effective date the dissolution if not effective on the date of filing:	ot be
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).	17 JAN 23
		PH 2: 43
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:	
	1497 Upshaw Ter	
	Port Charlotte, FL 33952	
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:	l
4	Juanda Jox Ananda J Fox Signature Printed Name	

FILING FEE: \$25.00