## 116000051007

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## **COVER LETTER**

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations				
SUBJECT: SIXLCY LC (Name of Limited	Liebilie Communi			
(Name of Limited	Liability Company)			
The enclosed Articles of Dissolution and fee(s) are submitted	i for filing.			
Please return all correspondence concerning this matter to the	e following:			
Ellen Valentine				
(Name of Person)				
Ellen Valentine (Name of Person)  Saxley LC (Firm/Company)				
(Firm/Company)				
5 Anna Ct				
(Ac	ldress)			
5 Anna Ct (Address)  HILLEM Head Sc 29926 (City/State and Zip Code)				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
Ellen Val-mtric (Name of Person)	at 770,862 1544			
(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:	Street Address:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is	
	SaxleyLC	
2.	The Articles of Organization were filed on 2/9/17 and assigned	
	document number <u>L16000051007</u>	
3.	The delayed effective date the dissolution if not effective on the date of filing: 231 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 listed as the document's effective date on the Department of State's records.	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).  Moved to Suth Cavaline 5	n
	H 5: 27	<u></u>
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:	
	5 Anna C+	
	Hulton Head SC 29926	
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and love to wind up the company's activities and affairs:	listed
_	Elen M. Valentine Printed Name	
	Signature Printed Name	

FILING FEE: \$25.00