# 1/60008543/

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

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K. SALY FEB 6 2018

#### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: 6, 1/espie Gytters LCC (Name of Limited Liability Company)
(State of Elimed Emonity Company)
The enclosed Articles of Dissolution and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
BriANGINESPIC
(Marie C. Ferrory)
Gillespie Gitters LLC (Firm/Company)
(Firm/Company)
718 SANTA FE AVE
(-1887)
Demand Beh FL 32174
(City/State and Zip Code)
For further information concerning this matter, please call:
MARK Gillespic at (352 ) 236-317 L  (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    \$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

	ARTICLES OF DISSO	LUTION	
	FOR A LIMITED LIABILITY		DIVISION OF THE
The name of a limited liab	ility company is		18 FEB -5 PH 2:
v	on were filed on $05/02$	/2016 and	d assigned
document number	6000095431	,	
1. otel	the dissolution if not effective or we date cannot be prior to or more than 90 this block does not meet the applica ective date on the Department of State	ore stateter) ming requir	1/22/2007  whit is received for filing) ements, this date will not be
A description of occurrence 605.0707, Florida Statutes.	te that resulted in the limited liab (copy 605.0707 on back cover le	ility company's dissolu etter).	ition pursuant to section
If there are no markets	utantha nama and addaes of the		
activities and affairs:	nter the name and address of the BRIAN 6, 11	` '	
	MARIAN 6,11	egu	<del>.</del>
Signature of an authorized above to wind up the co	person or if there are no member ompany's activities and affairs:	rs, the signature of the	person appointed and
Prince Alleson	e. F	BRIAN GILLE	
Signature	<u>~</u>	Printed Nar	<del>7</del> → €

FILING FEE: \$25.00