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SECRETARY OF STATE
SECRETARY SEE, FLORIDA

D. SCOTT DEC 9 2016

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: PPNK HAOMA LO	ich lite Company)
(Mame of Limited L	daolity Company)
The enclosed Articles of Dissolution and fee(s) are submitted f	or filing.
Please return all correspondence concerning this matter to the	ollowing:
Claudra Co	brera
(Name of	rerson)
(Firm/Co	mpany)
236055W108th F) į
(73000	(CSS)
Honestead Il 32	560
(City/State an	d Zip Code)
	ALCC -
For further information concerning this matter, please call:	世界工
Charle of Person)	at (786) 444-25698 & [] (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	SE C
☑ \$25.00 Filing Fee and Certificate of Dissolution	□ \$55.00 Filing Fee, Certificate of Dissolution &
2325.00 Fining Fee and Continuate of Dissolution	Certified Copy (additional copy is enclosed)
MAILING ADDRESS:	STREET/COURIER ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is Prok HAbama UU				
	THE THORING CO.				
2.	The Articles of Organization were filed on				
	document number <u>L 16000 125 452</u>				
3.	The delayed effective date the dissolution if not effective on the date of filing: (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).				
	The Company 95 Generatives loss				
•					
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:				
	29092 IM 1089U L HOMESKOOT IN 39035				
6	Signature of an authorized person or if there are no members, the signature of the person appointed and				
lis1	ed above to wind up the company's activities and affairs:				
	SSE & E				
	Chaufea Cabella 25 2 0				
	Signature Printed Name				
	FILING FEE: \$25.00				