1/600/37649

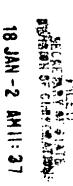
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



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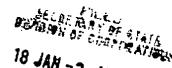
K. SALY JAN - 3 2018

COVER LETTER

	ion of Corporations	
SUBJECT: _	Objective View	Home Consultants LLC d Liability Company)
	(common services)	, a success of the second of t
The enclosed a	Articles of Dissolution and fee(s) are submitte	ed for filing.
Please return a	all correspondence concerning this matter to the	he following:
	Mary Ellen	Bonelli e of Person)
	Objective View	Home Consultants, UC
	•	Address)
	Naples, FL (City/State	34113 e and Zip Code)
For further infe	formation concerning this matter, please call:	
M	WY Ellen bonelli (Name of Person)	at (239) 776-8737 (Area Code & Daytime Telephone Number)
Enclosed is a ch	neck for the following amount:	
\$25.00	0 Filing Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)
	MAILING ADDRESS:	STREET/COURIER ADDRESS:
	Registration Section	Registration Section
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
	Tallahassee FI 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			
1. The name of a limited liability company is Objective View Home Consulting UC			
2. The Articles of Organization were filed on 7/15/20/6 and assigned			
document number <u>L 16000 137 649</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).			
O Business 2017			
No debts, obligations or other liabilities			
5. If there are no members, enter the name and address of the person appointed to wind up the company's			
activities and affairs:			
Mary Ellen Bonelli			
homas Bonell			
138 Palmetto Dunes Circle, FC			
6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:			
MoryElle Sorell. Mary Ellen Bonelli. Signature Printed Name			
FILING FEE: \$25.00			