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COVER LETTER

TO: Registration Section Division of Corporations

GREEN LION REALTY REFERRALS LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mary Moore		
(Name of Pe	son)	
Green Lion Realty Re	eferrals LLC	
(Firm/Comp	any)	
P.O. Box 3493		
(Address	7 28 9 -T	
Placida, FL 33946	TARES T	
(City/State and Z	ip Code)	
For further information concerning this matter, please call:		
Mary Moore	941 276-8142	
(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

1.	The name of a limited liability company is Green Lion Realty REferrals LLC					
2.	The Articles of Organization were filed on and assigned and assigned					
	document number L16000	156883	<u></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 605.0707, Florida Statutes,	e that resulted in the lin (copy 605.0707 on back	nited liability company's dissol k cover letter).	ution pursuant to section		
	No longer doing business					
						
5.	If there are no members, er activities and affairs:	Mary S Moore	ss of the person appointed to w	ind up the company's		
		PO Box 3493		HASS		
		Placida, FL 33946		E T		
				ORID		
6. lis	Signature of an authorized ted above to wind up the co	person or if there are no mpany's activities and a	o members, the signature of the affairs:	person appointed and		
	Medde Shore		Mary S Moore			
	Signature		Printed Na	ne		

FILING FEE: \$25.00