

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Scott Whipple Paintings, 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:

Scott Whipple

(Name of Person)

Scott Whipple Paintings, LLC

(Firm/Company)

1320 SE 27th Street

(Address)

Cape Coral, FL 33904

(City/State and Zip Code)

For further information concerning this matter, please call:

Scott Whipple

(Name of Person)

at (239) 910-6625

(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

FILED

1. The name of a limited liability company is

Scott Whipple Paintings, LLC

2018 DEC 21 PM 4: 28

2. The Articles of Organization were filed on October 15, 2016 and assigned

SECRETARY OF STATE
TALLAHASSEE, FL

document number L16000195328

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).

Not making any profit or loss.

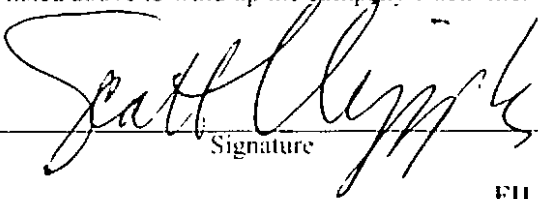
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Scott Whipple

1320 SE 27th Street

Cape Coral, FL 33904

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:


Signature

SCOTT WHIPPLE
Printed Name

FILING FEE: \$25.00