2/7000/16046

(Red	questor's Name)	
(A.J.		
(Add	dress)	
	 	
(Add	fress)	
(City	//State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Name)
(Doc	cument Number)	
Certified Copies	Certificates of	f Status
Special Instructions to F		
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Office Use Only



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SECRELARY OF STATE ALLAHASSEE, FLORIDA 13 A 13 O U V

06-15-18

COVER LETTER

TO:		ration Section on of Corporations			
SUBJE		EQUITY INDEED IS TERRIFIC, LLC	2		
30031.	.c	(Name of Limite	ed Liability Compa	ny)	
		Articles of Dissolution and fee(s) are submitte	-		
Please i	return al	Il correspondence concerning this matter to t	he following:		
		KEVIN REDLING			
		(Nam	e of Person)		
HARDING BELL INTERNATIONAL, INC					
(Firm/Company)					
	113 PONTOTOC PLAZA				
	(Address)				
		AUBURNDALE, FL 33823 (City/State	e and Zip Code)		
For furt	ther info	ormation concerning this matter, please call:			
	ΚE\	/IN REDLING	863	968-1010	
		. (Name of Person)	(Area C	ode & Daytime Telephone Number)	
Enclose	d is a che	eck for the following amount:			
\$25.00 Filing Fee and Certificate of Dissolution			g Fee, Certificate of Dissolution & Copy (additional copy is enclosed)		
		MAILING ADDRESS: Registration Section		EET/COURIER ADDRESS: stration Section	
		Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building		
		Tallahassee, FL 32314	2661	On Building Executive Center Circle Threspo. FL 32301	

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The Articles of Organization were filed on JAN	NUARY 24TH, 2014 and assigned
document number	
The delayed effective date the dissolution if no teffective date cannot be prior to Note: If the date inserted in this block does not me listed as the document's effective date on the Depa	eet the applicable statutory filing requirements, this date will not be
ZAZ ATAT KISMAS STABIOS TEHNY DUZMAUT VIL	e limited liability company's dissolution pursuant to section back cover letter).
PURSUANT TO FLORIDA STATUTE 605.0701(2). ALL MEMBERS CONSENT TO THE DISSOLUTION
OF THE ENTITY.	
•	
·	
If there are no members, enter the name and a	address of the person appointed to wind up the company's
If there are no members, enter the name and a activities and affairs:	
If there are no members, enter the name and a activities and affairs:	address of the person appointed to wind up the company's
If there are no members, enter the name and a activities and affairs:	address of the person appointed to wind up the company's
If there are no members, enter the name and a activities and affairs:	are no members, the signature of the person appointed and
If there are no members, enter the name and a activities and affairs:	are no members, the signature of the person appointed and

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

ame of Limited Liability Company:	
ocument number of Limited Liability Company is:	
Date of dissolution was:	
Description of information that must be included in a written claim:	
A detailed explanation of the claim including all facts and circumstances relating to said claim as well as any evidence	
providing for the validity of the claim. Additionally, it must be stated if the claim is admitted or not admitted, in whole	;
or in part, and the relative amounts associated with such assertions.	_
	_
	201
>	71 NNF 9102
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporation)	=
7810 GALL BLVD., STE 161	2
ZEPHYRHILLS, FL 33541	₩ ##
¥	
A claim against the above named limited liability company will be barred unless a proceeding to enforce claim is commenced within 4 years after the filing of this notice.	e the

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00