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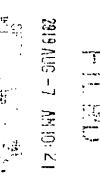
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COVER LETTER

TO: Registration Section Division of Corporations

_{r.} Totally Twisted 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:

Barry White
(Name of Person)
Totally Twisted LLC
(Firm/Company)
11928 Cypress Links Dr.
(Address)
Fort Myers, FL 33913
(City/State and Zip Code)

For further information concerning this matter, please call:

Barry White	at (239	,464-4691
(Name of Person)		(Area Code	& Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$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

. The Articles of Organization	were filed on May 31, 2017	and assigned
document number L1700011	945306	
Note: If the date inserted in the	he dissolution if not effective on the da date cannot be prior to or more than 90 days lat his block does not meet the applicable statu ive date on the Department of State's recor	ttory filing requirements, this date will not i
. A description of occurrence 605.0707. Florida Statutes, (that resulted in the limited liability corcopy 605.0707 on back cover letter).	npany's dissolution pursuant to section
The members of the LLC have	unanimously consented to dissolve the LL	C. 逻
		
		<u> </u>
	er the name and address of the person a	appointed to wind up the company;'s
activities and affairs:		