

L17000164207

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

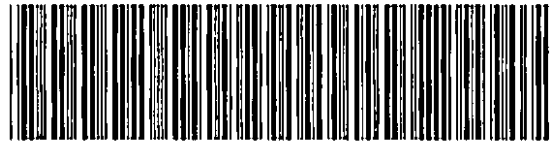
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/07/17--01008--017 **25.00

FILED

17 NOV -6 AM 9:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. WARREN

NOV 07 2017

PM 6:12

NOV 10 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **Barrow Valuation Group, 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:

Michael D. Barrow

(Name of Person)

Barrow Valuation Group, LLC

(Firm/Company)

909 Myrtle Street NE

(Address)

Atlanta, GA 30309

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Barrow

(Name of Person)

404 668-2173

at () (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

Barrow Valuation Group, LLC

2. The Articles of Organization were filed on 08/01/2017 and assigned

document number L17000164207

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).

Filed by mistake. Needed to register with the State of Florida as a foreign LLC

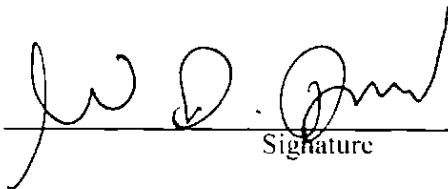
Please file back-to-back with attached Qualification form

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

909 Myrtle Street NE

Atlanta, GA 30309

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

Michael D. Barrow

Printed Name

FILING FEE: \$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA