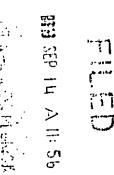
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(Re	questor's Name)			
(Àd	dress)			
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(Cit	ty/State/Zip/Phone	e #)		
☐ PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				



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## COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: RW Vehicle Roadside Repair LLC (Name of Limited Liability Company)
(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:
RANDOLPH W WILSON (Name of Person)
RW Ventile Roadside Repaire LIC (Firm/Company)
4589 Dunbin LN 3 3
(Firm/Company)  4589 Dunbin LN (Address)  FL 32564  (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Randolph WILSon at (850) 305 4279 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee and Certificate of Dissolution  \$\Boxed{\substitute{1}}\$\$ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section  STREET/COURIER ADDRESS: Registration Section

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

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 liab  R W Which	ility company is ROAdside Repair	LhC
2. The Articles of Organizati	on were filed on 28 Aug 2017	and assigned
document number	7000182893	
Note: If the date inserted in	the dissolution if not effective on the date of filing: re date cannot be prior to or more than 90 days later than date do this block does not meet the applicable statutory filing receive date on the Department of State's records.	cument is received for filing) quirements, this date will not be
4. A description of occurrence 605.0707, Florida Statutes,	te that resulted in the limited liability company's dissectory 605.0707 on back cover letter).	solution pursuant to section
try business	Consist Post Office, USP	ostal Scrvice
Contract was	pulled From My Comp	IAN V AS Resul
Leaving the C	companyable dissolve my	business
5. If there are no members, e	nter the name and address of the person appointed to	wind up the company's
activities and affairs:	KANdolph WWILSON	
	4589 Dorbin LN	
	HOLT FL 32564	THE SEPTIMENT OF THE SE
6. Signature of an authorized listed above to wind up the co	person or if there are no members, the signature of tompany's activities and affairs:	
Ladelph W. Signature	When Rando Lon Printed?	W. WILSON

FILING FEE: \$25.00