L93000000418

(Requestor's Name))
(Address)	
(Address)	
(City/State/Zip/Pho	ne #)
PICK-UP WAIT	MAIL
(Business Entity N	ame)
(Document Numbe	er)
Certified Copies Certificat	es of Status
Special Instructions to Filing Officer:	
·	
	i

Office Use Only



400296394534

03/22/17--01009--030 **25.00



D. SCOTT MAR 2 3 2017

COVER LETTER

TO: Regis

Registration Section Division of Corporations

Subject: Suwannee Valley AP Services LC

(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:

Cindy A Payne

(Name of Person)

Suwannee Farms LLC

(Firm/Company)

19620 N County Road 349

(Address)

O'Brien, FL 32071

(City/State and Zip Code)

For further information concerning this matter, please call:

Cindy A Payne

__386

776-2946

(Name of Person)

(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

	e of a limited liab e Valley AP Servic	bility company is ces LC			·	
2. The Artic	les of Organizat	ion were filed on 11/30	0/1993	and assigned		
documen	t number	0000418				
Note: If	the date inserted it	ve date cannot be prior to or	effective on the date of firmore than 90 days later than 6 the applicable statutory fillment of State's records.	date document iš receive	d for filing) date will not b	ne
4. A descrip 605.0707,	ntion of occurrence Florida Statutes	ce that resulted in the li . (copy 605.0707 on ba	imited liability company` ack cover letter).	s dissolution pursua	int to section	l
		and were sold and a new c				
	re no members, e	enter the name and addr Cindy A. Poyne	ress of the person appoint	ted to wind up the co	ompany's	
		22316 144th Street			· · · · · · · · · · · · · · · · · · ·	
		Live Oak, FL 32060)		100	٠
					超多	FIL
6. Signature listed above	of an authorized to wind up the co	I person or if there are nonpany's activities and	no members, the signatur d affairs:	e of the person appo	Sinted and Francisco	, (T) 2. (C) 3. (C)
Una	ly A ay	ne	Cindy A Payne		<u> </u>	<u>n</u>
	→ Signature Company → Compa	J —	Prin	nted Name		

FILING FEE: \$25.00