: L94000006643

| (Re | questor's Name) | |
|---------------------------|----------------------|--------|
| (Add | dress) | |
| (Add | dress) | |
| (City | y/State/Zip/Phone #) | |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Name) | |
| (Do | cument Number) | |
| Certified Copies | Certificates of | Status |
| Special Instructions to i | Filing Officer: | |
| | | |
| 194-64 | 3 | 707 |
| 25 | Office Use Only | |



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04/22/05--01024--025 **52.50





April 27, 2005

PEGGY FARREN 400 7TH AVE. S. NAPLES, FL 34102

SUBJECT: FARREN INVESTMENT GROUP, L.C.

Ref. Number: L94000000643

We have received your document for FARREN INVESTMENT GROUP, L.C. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6890.

Jason Merrick Document Specialist

Letter Number: 005A00029196

TRANSMITTAL LETTER

| Division of Corporations | | | | | | |
|---|--|--|--|--|--|--|
| SUBJECT: FARREN INVESTMENT GROUP, INC. (Name of Limited Partnership) | | | | | | |
| DOCUMENT NUMBER: L9400000 643 | | | | | | |
| The enclosed Certificate of Cancellation and fee(s) are submitted for filing. | | | | | | |
| Please return all correspondence concerning this matter to the following: | | | | | | |
| PEGG FARREN (Name of Person) | | | | | | |
| FARREN INVESTMENT GROUP (Firm/Company) | | | | | | |
| 400 7 Th A WE \$ | | | | | | |
| (Address) | | | | | | |
| NAPLES FL 34102 (City/State and Zip Code) APE S FL 34102 APE S FL 34102 APE S FL 34102 | | | | | | |
| For further information concerning this matter, please call: | | | | | | |
| For further information concerning this matter, please call: FEGGY FARREN at (239) 434 - 9403 TO (Name of Person) (Area Code & Daytime Telephone Number) | | | | | | |
| Enclosed is a check for the following amount: | | | | | | |
| (additional copy is enclosed) \$52.50 Filing Fee & Certificate of Status & Cer | | | | | | |
| | | | | | | |

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

TO:

Registration Section

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF DISSOLUTION FOR A FLORIDA LIMITED LIABILITY COMPANY

| 1. The name of the limited liability company is | | | | |
|--|---|---------------------------------------|---------------------|----------|
| FAR FAR | REN 1 | N VESTN | WENT LAD | up, in |
| 2. The date the dissolution was approved: | 2/31/200 | | | |
| A description of the occurrence that resulted section 608.441, Florida Statutes, (copy of 60) | | | | suant to |
| PARTNERS dec | el d Ed | To 1 | nlRuida | TH |
| CORPORATION. | | · · · · · · · · · · · · · · · · · · · | | |
| | | | | |
| | | | FAFE L | 11 |
| 4. CHECK ONE: All debts, obligations and liabilities of the lin-OR- Adequate provision has been made for the description. 5. All remaining property and assets have been respective rights and interests. | ebts, obligations | and liabilities | pursuant to \$608. | 4421 |
| 6. CHECK ONE: There are no suits pending against the compa | any in any court. | | | |
| Adequate provision has been made for the sa be entered against it in any pending suit. | ntisfaction of any | / judgment, or | der or decree which | h may |
| Signatures of the members having the same pothe dissolution: | ercentage of me | mbership inte | rests necessary to | approve |
| Signature . Janen | Тур | ed or Printed 1 | name FARECN | |
| | | | | <u> </u> |
| • | <u>. </u> | · · · · · · · · · · · · · · · · · · · | <u> </u> | <u></u> |
| <u> </u> | = | 1.5 | · <u>* ,3</u> | <u> </u> |