# P12000087299

| (Re                     | questor's Name)   |             |
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| (Ad                     | dress)            |             |
| (Cit                    | y/State/Zip/Phone | <del></del> |
| PICK-UP                 | ☐ WAIT            | MAIL        |
| (Bu                     | siness Entity Nar | me)         |
| (Do                     | cument Number)    |             |
| Certified Copies        | _ Certificates    | s of Status |
| Special Instructions to | Filing Officer:   |             |
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Office Use Only



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CM 29-14

### **COVER LETTER**

| Division of Corporations   |               |
|--|---------------|
| SUBJECT: Samantha LWW/tey PA   | <u> </u>      |
| (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: | SECONDASSER F |
| Samantha Ww//cy (Name of Person)   | PH 9:58       |
| Sanasha C WOOlley PA (Firm/Company)  | -             |
| 24 Redund and  | _             |
| Plantation P, 33317  |               |
| (City/State and Zip Code)  | -             |
|  |               |
| For further information concerning this matter, please call:   |               |
| Samantha Willey 954, 701-58  | , <i>Ç</i>    |

Enclosed is a check for the following amount:

TO:

Registration Section

\$25.00 Filing Fee and Certificate of Dissolution

(Name of Person)

\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)

(Area Code & Daytime Telephone Number)

#### **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  Siman His L WWII-CYPA  |
|----------|--|
|          | The Articles of Organization were filed on $\frac{0.000087299}{0.000087299}$ and assigned document number $\frac{912.000087299}{0.000087299}$  |
| 3.       | The delayed effective date the dissolution if not effective on the date of filing: The delayed effective date the dissolution if not effective on the date of filing:  |
| 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).  DISCOMMUNATION OF SENICES PROY ded.  |
| 5.       | If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:    Amantha   Woolty   Company's   Com |
| 6.<br>ab | Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:  |
| <u> </u> | Signature Printed Name  Samuatha Walley  FILING FEE: \$25.00   |