Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092 Fax Number : (850)878-5368

LLC DISSOLUTION OR WITHDRAWAL JACKSONVILLE RESTAURANT MANAGEMENT, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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Corporate Filing Menu

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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: Jacksonville Restaurant Management, 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:

AZIZ Hashim

(Name of Person)

Tacksonville Restaurant Management, uc

(Firm/Company)

4170 Ashford Dunwoody Rd NE, Swite 390

(Address)

Atlante GA 30319

(City/State and Zip Code)

For further information concerning this matter, please call:

Name of Person)

at (404) 865-3351

(Area Code & Daving Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee and Certificate of Dissolution

S\$5.00 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	•
Jacksonville Restaura	+ managenest, Uc
2. The Articles of Organization were filed on 01 3/12011	and assigned
document number <u>L 110000 12867</u>	•
3. The delayed effective date the dissolution if not effective on the date cannot be prior to or more than 90 days late	te of filing: ar than date document is received for filing)
4. A description of occurrence that resulted in the limited liability con 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).	_
No longer doing business, all ass	ets liquidated
one several to the first terms of the contract	e de de la companya d
ro she bushka	
	in the second of
5. If there are no members, enter the name and address of the person a	appointed to wind up the company's
activities and affairs: A7.2 + QShil	Y
4170 Ashford	Dunwoody Rd NE
Sur 390	
er detect	· _
Afland GA	- 303/9
6 Signature of an authorized person or if there are no members the ci	and at the person appointed and
6. Signature of an authorized person or if there are no members, the si listed above to wind up the company's activities and affairs:	gracuite of the person apportited and ,
	THE STATE OF
1 / / /	AZIZ Hashim
Signantes	Printed Name

FILING FEE: \$25.00

2014 JUN 10 AM 9: 26