

L120000 65771

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

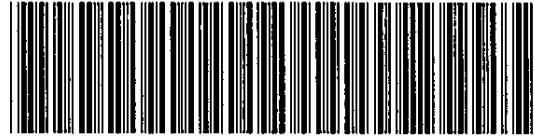
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2015 MAR 13 PM 4:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

APR 01 2015
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Innovative Structural Design, 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:

Mare A. Jean
(Name of Person)

Innovative Structural Design, LLC
(Firm/Company)

3825 East Lake Terrace
(Address)

Miramar, Florida 33023
(City/State and Zip Code)

For further information concerning this matter, please call:

Mare A. Jean at (305) 308-5405
(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

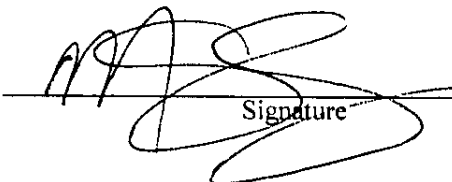
FLORIDA DIVISION OF CORPORATIONS

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
Innovative Structural Design, LLC
2. The Articles of Organization were filed on 5/15/2012 and assigned
document number L12000065771
3. The delayed effective date the dissolution if not effective on the date of filing 5/15/2012
(effective date cannot be prior to or more than 90 days later than date document is received for 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).
Mare A. Jean, MGRM, was offered a full-time position with another company.

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs:

6. Signature of an authorized person or if there are no members, the signature of the person appointed and
listed above to wind up the company's activities and affairs:


Signature

Mare A. Jean
Printed Name

FILING FEE: \$25.00

2015 MAR 13 PM 4: 31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED