

L15000013115

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000288716710

FILED

2016 AUG 18 AM 9:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

DEPARTMENT OF STATE

16 AUG 18 PM 4:35

K. SALLY
EXAMINER

AUG 19

FLORIDA FILING & SEARCH SERVICES, INC.

**P.O. BOX 10662 TALLAHASSEE, FL 32302
155 Office Plaza Dr Ste A Tallahassee FL 32301
PHONE: (800) 435-9371; FAX: (866) 860-8395**

DATE: 08-18-16

NAME: 8 FLORIDA LLC

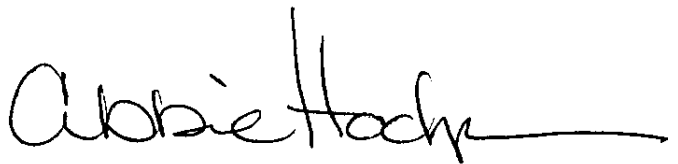
TYPE OF FILING: DISSOLUTION

COST: 55.00

RETURN: CERTIFIED COPY

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 8 FLORIDA 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:

Nicholas P. Hopeck

(Name of Person)

Delaney Corporate Services, Ltd.

(Firm/Company)

99 Washington Ave., Ste. 805A

(Address)

Albany, NY 12210

(City/State and Zip Code)

For further information concerning this matter, please call:

Nicholas Hopeck

(Name of Person)

at (800) 717-2810

(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**

FILED
2016 AUG 18 AM 9:24
CLERK OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
8 FLORIDA LLC

2. The Articles of Organization were filed on 1/23/2015 and assigned
document number L15000013115

3. The delayed effective date the dissolution if not effective on the date of filing: Upon Filing
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

The limited liability company never conducted business and the sole member of the limited liability company
elects to dissolve the 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

Arkady Zirkiev

Printed Name

FILING FEE: \$25.00