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## SECRETARY OF STATE

O SIMMONS FEB 0 2 2022



## **COVER LETTER**

TO: Registration Section Division of Corporations

THEREPS.COM, LLC

SUBJECT:

(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:

JOHN B. HUMPHREY'S

(Name of Person)

THEREPS.COM, LLC

(Firm/Company)

1577 OCEANIA DR S

(Address)

NAPLES, FL 34113

(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN HUMPHREYS	407	342-0381
	at (	_)
(Name of Person)	(Area Coc	ie & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

555.00 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 Address: Registration Section

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

 The name of a limited liability company is THEREPS.COM, LLC

2. The Articles of Organization were filed on  $\frac{12/21/2000}{2}$  and assigned

document number \_\_\_\_\_

3. The delayed effective date the dissolution if not effective on the date of filing: 12/31/2021 (effective date cannot be prior to or more than 90 days later than date document is received for filing)

<u>Note:</u> 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).

res. L. T. + Pa. The diagnossil with Conrow - Bagines Hu Lige. PARTNER/PRESIDENT RETIRING DUE TO HEALTH ISSUES (CANCER) 5. If there are no members, enter the name and address of the person appointed to wind up the company'sor JOHN B. HUMPHREYS activities and affairs:

1577 OCEANIA DR S

NAPLES, FL 34113

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:

July BC

JOHN B. HUMPHREYS

Printed Name

FILING FEE: \$25.00