

LO30000 03362

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

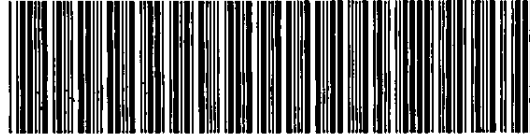
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 01 2016

J SHIVERS

2719



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 19, 2016

W.C. TUNNO JR
PO BOX 666
HAINES CITY, FL 33845

SUBJECT: A & O GROVES, LLC
Ref. Number: L03000003362

We have received your document for A & O GROVES, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707(1)(c), Florida Statutes, must be contained in the document.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist III
Registration/Qualification Section

Letter Number: 216A00010586

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: A & O GROVES 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:

W. C. TUNNO JR
(Name of Person)

(Firm/Company)

P.O. Box 666
(Address)

HAINES CITY, FL 33845
(City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person) at (_____) _____
(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

1. The name of a limited liability company is

A + O GROVES LLC

2. The Articles of Organization were filed on 1-27-2003 and assigned

document number L03000003362

3. The delayed effective date the dissolution if not effective on the date of 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).

COMPANY SHUT DOWN & SOLD ASSETS

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

W.C. TUNNO JR
Printed Name

FILING FEE: \$25.00

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