

L04000004524

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

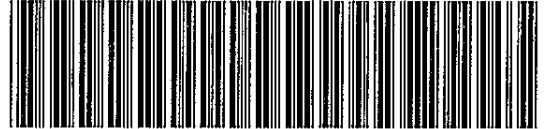
Special Instructions to Filing Officer:

L04-4524

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06/09/05--01007--006 **35.00

LLC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 JUL -5 PM 4:00

FILED



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

June 20, 2005

S. RENEE COXWELL
833 BURNTLEAF LANE
TALLAHASSEE, FL 32310

SUBJECT: COXWELL FRAMING, LLC
Ref. Number: L04000004524

We have received your document for COXWELL FRAMING, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return 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) 245-6890.

Jason Merrick
Document Specialist

Letter Number: 105A00042183

FILED
05 JUL -5 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Coxwell Framing, 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:

S. Renee Coxwell
(Name of Person)

(Firm/Company)

833 Burntleaf Lane
(Address)

Tallahassee FL 32310
(City/State and Zip Code)

For further information concerning this matter, please call:

S. Renee Coxwell at (850) 570-7799
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

you have payment

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

05 JUL -5 PM 4:00
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

1. The name of the limited liability company is

Coxwell Framing, LLC

2. The date the dissolution was approved: 4/1/05

3. A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy of 608.441 on back of cover letter).

Company was not making money -
therefore members mutually
agreed to close company.

4. **CHECK ONE:**

☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.
-OR-

☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

5. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

6. **CHECK ONE:**

☒ There are no suits pending against the company in any court.
-OR-

☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution :

Signature

Typed or Printed name

Rogelio Ramirez Jr
S. Renee Coxwell

Rogelio Ramirez
S. Renee Coxwell