

LO4 0000 28588

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

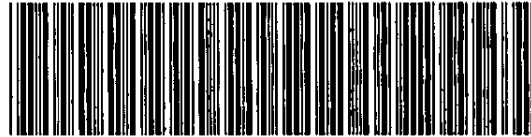
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200285797932

05/18/16--01009--014 **25.00

5/21
RECEIVED
16 MAY 18 AM 10:59
SECRETARY OF STATE
EMBASSY OF THE UNITED STATES
WASHINGTON, DC 20520

MAY 20 2016
J SHIVERS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dynamic Marketing Solutions, 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:

Yolanda Puleo

(Name of Person)

Dynamic Marketing Solutions

(Firm/Company)

1835 Verde Way

(Address)

Orlando, FL 32835

(City/State and Zip Code)

For further information concerning this matter, please call:

Yolanda Puleo

(Name of Person)

407

467-2219

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
Dynamic Marketing Solutions, LLC

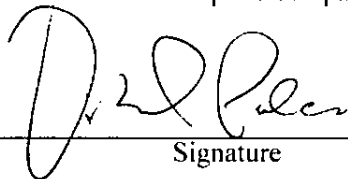
2. The Articles of Organization were filed on 4/7/2004 and assigned
document number 1.04000028588

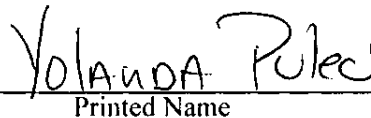
3. The delayed effective date the dissolution if not effective on the date of filing: May 21, 2016
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, 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).
Voluntary dissolution as managing member/owner is retiring from 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


Printed Name

FILING FEE: \$25.00

FILED
16 MAY 18 AM 10:59
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA