

COVER LETTER

TO: Registration Section
Division of Corporations

Clay Johnson 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:

Jordan Clay Johnson

(Name of Person)

Clay Johnson LLC

(Firm/Company)

2222 Glen Mist Drive

(Address)

Valrico FL 33594

(City/State and Zip Code)

For further information concerning this matter, please call:

Jordan Clay Johnson

(Name of Person)

at (

813 340-0057

_____) _____
(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 Address:

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

