

L040000042648

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

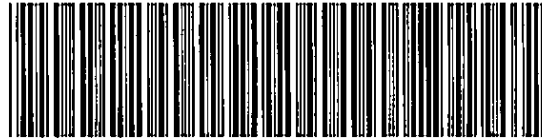
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/09/20--01012--001 **25.00

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DEC 14 2020
S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Form First, 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:

Marc C Leslie

(Name of Person)

Form First, LLC

(Firm/Company)

19545 Lily Pond Ct

(Address)

Brooksville, Florida 34601

(City/State and Zip Code)

For further information concerning this matter, please call:

Marc C Leslie

(Name of Person)

617

at ()

429-8897

(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

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

1. The name of a limited liability company is

Form First, LLC

2. The Articles of Organization were filed on June 7, 2004 and assigned

document number L04000042648

3. The delayed effective date the dissolution is not effective on the date of filing: 11-30-2020
(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 determination by all members of Form First, LLC
to cease operations and to dissolve 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

Marc C Leslie

Printed Name

FILING FEE: \$25.00

2020 NOV 9 PM 6:49
CLERK OF COURT
STATE OF FLORIDA

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[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

Detail by Entity Name

Florida Limited Liability Company
FORM FIRST, LLC

Filing Information

Document Number L04000042648
FEI/EIN Number 20-1250009
Date Filed 06/07/2004
State FL
Status ACTIVE
Last Event REINSTATEMENT
Event Date Filed 01/10/2018

Principal Address

19545 LILY POND CT
Brooksville, FL 34601

Changed: 10/31/2019

Mailing Address

19545 LILY POND CT
Brooksville, FL 34601

Changed: 10/31/2019

Registered Agent Name & Address

LESLIE, MARC C
19545 LILY POND CT
BROOKSVILLE, FL 34601

Name Changed: 01/10/2018

Address Changed: 03/03/2012

Authorized Person(s) Detail

Name & Address

Title PG

LESLIE, MARC C
19545 LILY POND CT
BROOKSVILLE, FL 34601

To Registration Section

*I did not e-file because the
online form had an old
outdated principal
address for Form First, LLC.*

*As noted on the cover letter
and this Detail by
Entity Name form, the
correct principal address
(and mailing address) is
19545 Lily Pond Ct.,
Brooksville, FL 34601.*

Thank you,

Marc Leslie

11/6/20