

LDSC000042837

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2015 DEC 21 A 10:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DEC 21 2015

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: \_\_\_\_\_

DAGMAR JONES, 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:

DAGMAR JONES

(Name of Person)

DAGMAR JONES, LLC

(Firm/Company)

6184 VAN SIMMONS RD

(Address)

WAUCHULA, FL 33873

(City/State and Zip Code)

For further information concerning this matter, please call:

DAGMAR JONES

(Name of Person)

at

863, 773-0138

(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

DAGMAR JONES, LLC

2. The Articles of Organization were filed on 4/27/2005 and assigned

document number L05000042837

3. The delayed effective date the dissolution is not effective on the date of filing: 12/1/2015  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

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).

WENT OUT OF BUSINESS.


5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

DAGMAR JONES

6184 VAN SIMMONS RD

WAUGHAMMA, FL 33873

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

DAGMAR JONES

Printed Name

**FILING FEE: \$25.00**

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TALLAHASSEE, FLORIDA

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## Notice of Limited Liability Company Dissolution

**NOTE: This page is optional**

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: DAGMAR JONES, LLC

Document number of Limited Liability Company is: L05000042837

Date of dissolution was: 12/1/2015

Description of information that must be included in a written claim:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

6184 VAN SIMMONS RD  
WAUCHULA, FL 33873

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TALLAHASSEE, FLORIDA

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A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

DAGMAR JONES

Printed Name of the Person Filing

Dagmar Jones

Signature of the Person Filing

**Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00**