

L05000046072

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2021 MAY 21 AM 9:58
FALL ARK STATE 11000A

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: _____
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

(Name of Person)

(Firm/Company)

(Address)

(City/State and Zip Code)

For further information concerning this matter, please call:

_____ at (_____) _____
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &
Certified Copy | <input type="checkbox"/> \$60 Filing Fee,
Certificate of Status &
Certified Copy |
|--|---|--|--|

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

1. The name of a limited liability company is

Joseph A. Rose Family LLC (FI)

2. The Articles of Organization were filed on 5/9/2005 and assigned

document number CT # 9400020404 Customer # 1624823
Federal Tax ID # 51-0006522

3. The delayed effective date the dissolution if not effective on the date of filing: 7/10/2021
(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).

Property sold at 7048 Old Tabby Circle, Lakewood Ranch, Fl
34202

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

Joseph A. Rose, M.D.

7033 Brier Creek Court

Lakewood Ranch, Fl

34202

2021 MAY 21 AM 9:58
FILING OFFICE
TALLAHASSEE, FL 32301

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

Joseph A. Rose, M.D.
Printed Name

FILING FEE: \$25.00