

L05000123020

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

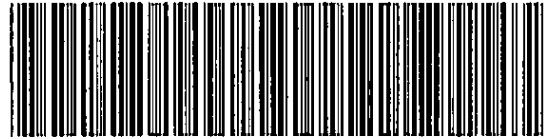
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000399445740

FILED
2017 27 PM 12:55
STATE
FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: McCurry Capital, 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:

Edgar W. McCurry, III

(Name of Person)

(Firm/Company)

549 LeMaster Drive

(Address)

Ponte Vedra Beach, FL 32082

(City/State and Zip Code)

For further information concerning this matter, please call:

Edgar W. McCurry, III

(Name of Person)

904

742-6686

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 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

FILED

2022 DEC 27 PM 12: 55

1. The name of a limited liability company is

McCurry Capital, LLC

SECRETARY OF STATE
TALLAHASSEE, FL

2. The Articles of Organization were filed on 12/28/2005 and assigned

document number L05000123020

3. The delayed effective date the dissolution if not effective on the date of filing: _____
(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).

Consent of all members.

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

Edgar W. McCurry, III

Printed Name

FILING FEE: \$25.00

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: McCurry Capital, LLC

Document number of Limited Liability Company is: L05000123020

Date of dissolution was: date Articles of Dissolution are file

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

The name, address and telephone number of the claimant, and the name, address and telephone number of claimant's attorney, if any. If the claimant is not represented by an attorney, the preferred method by which claimant may be contacted. A description of the claim, including a summary of the facts giving rise thereto and the claimant's reason to believe the Corporation is liable therefor, and the harm suffered by the claimant.

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

Edgar W. McCurry, III

549 LeMaster Drive

Ponte Vedra Beach, FL 32082

FILED
2022 DEC 27 PM 12:55
DIVISION OF STATE
CORPORATIONS, FL

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.

Edgar W. McCurry, III

Printed Name of the Person Filing

Edgar W. McCurry, III
Signature of the Person Filing

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