

L06000021595

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

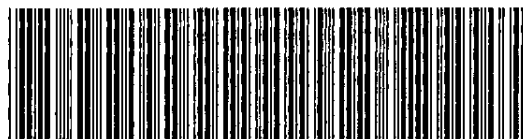
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/04/11--01042--005 **43.75

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

MAY 20 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 12, 2011

MICHAEL JACOBS
M J ISLAND ENTERPRISES, LLC
225 39TH COURT
VERO BEACH, FL 32968

SUBJECT: M J ISLAND ENTERPRISES, LLC
Ref. Number: L06000021595

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TALLAHASSEE, FLORIDA

We have received your document for M J ISLAND ENTERPRISES, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 711A00011801

*Sorry. I have signed all paperwork. Check
Already sent previous. I can be reached at
772-643-3883 if you have any further questions*

Thanks.

Mitofh

www.sunbiz.org

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MJ Island Enterprises 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:

MICHAEL JACOBS

(Name of Person)

MJ Island Enterprises LLC

(Firm/Company)

225 39th Court.

(Address)

Vero Beach, FL. 32968

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Michael Jacobs

(Name of Person)

at (772) 643-3883

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐

\$25.00 Filing Fee

☐

30.00 Filing Fee &
Certificate of Status

☐

\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐

\$60.00 Filing Fee,
Certificate of Status &
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

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

MJ Island Enterprises LLC.

2. The Articles of Organization were filed on 2/24/06 and assigned document number

L06000021595

3. The date the dissolution was approved: 05/01/11

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

Non-Income producing / Economy To expensive to
maintain. All debts + obligations have been paid.

5. CHECK ONE:

- ☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.
-OR-
☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

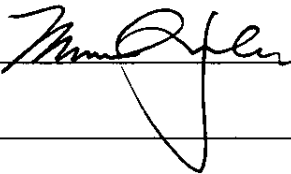
6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

- ☒ There are no suits pending against the company in any court.
-OR-
☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature



Printed Name

Michael Jacobs.