

206000091670

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

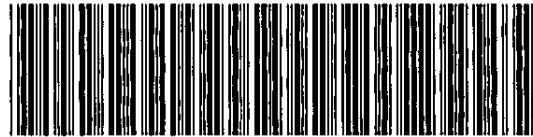
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200261801072

06/30/14--01027--010 **25.00

FILED
2014 JUN 30 PM 4:03
CLERK OF DISTRICT COURT
JULIA S. BROWN

JUL 03 2014

J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AJMD INVESTMENTS HOLDING COMPANY, 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:

YUDERCA BARBERA

(Name of Person)

ACCOUNTING PLUS MORE

(Firm/Company)

4100 CORPORATE SQ STE 153

(Address)

NAPLES, FL 34104

(City/State and Zip Code)

For further information concerning this matter, please call:

YUDY BARBERA

(Name of Person)

239

643-9968

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/COURIER ADDRESS:

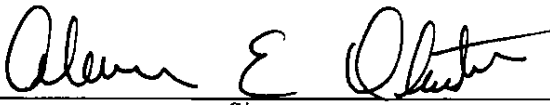
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

1. The name of a limited liability company is
AJMD INVESTMENTS HOLDING COMPANY, LLC
2. The Articles of Organization were filed on 09/19/2006 and assigned
document number L06000091670
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)
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).
COMPANY HAS NO BUSINESS ACTIVITY

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: ALEXANDER E DE SANTIS
9145 SW 171 TERRACE
PALMETTO BAY, FL 33157

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

ALEXANDER E DE SANTIS
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: AJMD INVESTMENTS HOLDING COMPANY, LLC

Document number of Limited Liability Company is: L06000091670

Date of dissolution was: 04/09/2014

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

COMPANY HAS NO BUSINESS ACTIVITY

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

ALEXANDER E DE SANTIS

9145 SW 171 TERRACE

PALMETTO BAY, FL 33157

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.

ALEXANDER E DE SANTIS

Printed Name of the Person Filing



Signature of the Person Filing

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