L060001091ddo

(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:		
MAY : 4 2024		

Office Use Only



400428651194

05/06/24--01025--014 **25.00

FILED 2024 HAY -6 PHI2: 53

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: J.5.5, LLC (Name of Limited Liability Company)				
(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:			
JUGLE E.	Smith III			
(Name of Person)				
T55 110				
J. 5.5 LLC (Firm/Company)				
Lees burls Floring 34748 (City/State and Zip Code)				
(not	nessy			
Leeshurt- (City/State a	F/0R/DA 34748 nd Zip Code)			
For further information concerning this matter, please call:				
JVG-Le E SMITH III (Nume of Person)	at (352) 516-2044			
(Name of Person)	(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:	Street Address:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY	2024 MAY -6 PMIZ: 5
The name of a limited lia		PH 12:5
<u>J. 3.</u>	5. LLC	
The Articles of Organizat	ion were filed on $11 - 21 - 2006$ and as	ssigned
document number <u>Lo</u>	6000 (09 666	
Note: If the date inserted in	e the dissolution if not effective on the date of filing: <u>O</u> $\frac{4}{3}$ ive date cannot be prior to or more than 90 days later than date document in this block does not meet the applicable statutory filing requirem fective date on the Department of State's records.	1-30-34 Tis received for filing) tients, this date will not be
A description of occurren 05.0707, Florida Statutes	ice that resulted in the limited liability company's dissolutions, (copy 605.0707 on back cover letter).	n pursuant to section
		
If there are no members	enter the name and address of the person appointed to wind	
nctivities and affairs:	JUG 4E E SMITH T	
	- 2600 Y DUNGS ROAD	
	Leesburg Fl. 3474	<u> </u>
Signature of an authorize ve to wind up the compa	d person or if there are no members, the signature of the persony's activities and affairs:	son appointed and listed
//) 	
Signature	TUGE F.	Smith III

FILING FEE: \$25.00