

L070000098071

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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MAY 02 2019

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2019 APR 18 AM 8:08  
SECRETARY OF STATE  
TALLAHASSEE, FL

V/A:SS

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: JGN Investments 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:

Lisa Nichols (Personal Rep)  
(Name of Person)

N/A  
(Firm/Company)

1530 Marcello Dr.  
(Address)

Melbourne, FL 32934  
(City/State and Zip Code)

For further information concerning this matter, please call:

Lisa Nichols (Personal Rep.) at (321) 543-8825  
(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:

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

JGN Investments LLC

Originally 9/26/07 +  
reinstated 10/22/14

2. The Articles of Organization were filed on \_\_\_\_\_ and assigned

document number L07000098071

3. The delayed effective date the dissolution if not effective on the date of filing: April 30, 2019  
(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).

Death of manging member +  
only member.

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

Lisa Nichols (Personal Rep)  
1530 Marcella Dr.  
Melbourne, FL 32934

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

Lisa Nichols (Personal Rep)  
Printed Name

**FILING FEE: \$25.00**