## 60800000515

(Requestor's Name)						
(Address)						
(Address)						
(Cit	ty/State/Zip/Phone	e #)				
PICK-UP	☐ WAIT	MAIL				
(Bu	siness Entity Nar	me)				
(Do	cument Number)					
Certified Copies	_ Certificates	s of Status				
Special Instructions to Filing Officer:						
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SECRETARY OF STATE

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## **COVER LETTER**

TO:		tration Section ion of Corporations				
oup.	ا م	TMD Enterprises LLC	•			
SUBJI	ECT: _	(Name of Limit	ed Liability Company)			
The en	closed /	Articles of Dissolution and fee(s) are submitt	ed for filing.			
		ll correspondence concerning this matter to				
		Kevin & Lynne Fiasconaro				
	(Name of Person)					
	TMD Enterprises LLC					
	(Firm/Company)					
		914 SW 28 Avenue				
		(	Address)			
		Boynton Beach FL 33435				
. ,		(City/Sta	te and Zip Code)			
For fur	ther inf	ormation concerning this matter, please call:				
	Kev	in & Lynne Fiasconaro	561 736-1434			
		(Name of Person)	(Area Code & Daytime Telephone Number)			
Enclose	ed is a ch	eck for the following amount:				
✓ \$25.00 Filing Fee and Certificate of Dissolution		0 Filing Fee and Certificate of Dissolution	\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)			
		MAILING ADDRESS: Registration Section	STREET/COURIER ADDRESS: Registration Section			

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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 liabit TMD Enterprises LLC	·					
2.	The Articles of Organization	ticles of Organization were filed on 12/31/2014 and assigned					
	document number L08000						
3.	The delayed effective date (effective	delayed effective date the dissolution if not effective on the date of filing: 12/31/2014  (effective date cannot be prior to or more than 90 days later than date document is received for filing)					
4.	A description of occurrence 605.0707, Florida Statutes,	e that resulted in the limited l (copy 605.0707 on back cove	iability company's dissolution relater).	on pursuant to section			
	Members have decided	to cease business oper	rations and dissolve the	LLC.			
				TA S			
	·						
				<del>SS</del>			
				20 Jan			
5	If there are no members on	tor the name and address of t	he person appointed to wind	F.S. ==			
٥.		Vovin 9 Lymna Figureran					
	activities and affairs:	Reviil & Lynne Flascor	idio				
		914 SW 28 Avenue					
6. lis	Signature of an authorized ted above to wind up the co	mpany's activities and affairs	nbers, the signature of the per				
0	5 Thom		Keurin A. Fias Grane Fiase  Printed Name	CONDRU			
4	hul Jugoscon	26	yone fics	enero			
,	Signature		Printed Name				

FILING FEE: \$25.00