# 10800019472

Office Use Only

G. MCLEOD

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**EXAMINER** 



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SECRETARY OF STATE
RALLAHASSEE, FLORIDA

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: PGJ 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:
DEII: Johnson
Philip Johnson (Name of Person)
(Maile of Felson)
(Firm/Company)
2438 Orsota Circle (Address)
Ocoee, FL 34761
(City/State and Zip Code)
For further information concerning this matter, please call:
Philip Johnsonat (_407) 766-4166
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee  Certificate of Status  Certificate of Status  Certificate of Status  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

108 and assigned document number
liability company's dissolution pursuant to section
letter).
SO SO SO
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ted liability company have been paid or discharged.
ts, obligations and liabilities pursuant to s. 608.4421.
among its members in accordance with their respective
v in any court
y in any court.
sfaction of any judgment, order or decree which may b
embership interests necessary to approve the dissolution
Printed Name
Philip G. Johnson
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