

LO8 0000 31635

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

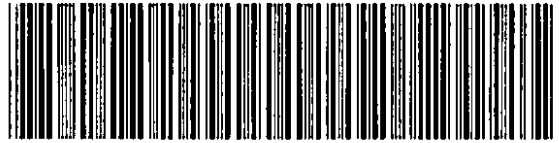
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300338656993

01/06/20--01034--014 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2020 JAN -6 PM 2:38

FILED

Start of Term

JAN 30 2020
I ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WHEELWORLD LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joseph H Brown

Name of Person

Blount Law, PL

Firm/Company

809 Walkerbilt Road, Suite 6

Address

Naples, FL 34110

City/State and Zip Code

jbrown@blountlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph H Brown

at (239) 592-4815

Name of Person

Area Code Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement of Termination:

FIRST: The name of the limited liability company is: WHEELWORLD LLC

SECOND: The Florida Document number of the limited liability company is: L08000031635

THIRD: The date of filing of the initial articles of organization is: 03/28/2008

FOURTH: The date of filing of the dissolution is: 12/31/2019 - FFF DATE

FIFTH: This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.

Bene
Signature of Authorized Representative

Sabine Bene
Typed or printed name of signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

CR2E141 (2/14)

FILED
2020 JAN -6 PM 2:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA