

LOF0000 92569

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

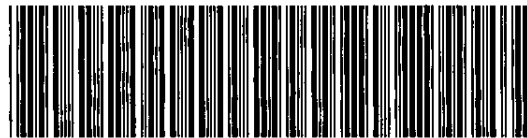
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers DEC 17 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JBAJ 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:

Hope Donald

(Name of Person)

JBAJ INVESTMENTS, LLC

(Firm/Company)

2301 Carson Lane

(Address)

Deltona, FL 32738

(City/State and Zip Code)

For further information concerning this matter, please call:

Hope Donald

(Name of Person)

386

at (

532-0231

) (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

JBAJ INVESTMENTS, LLC

2. The Articles of Organization were filed on September 29, 2008 and assigned

document number L08000092569

3. The delayed effective date the dissolution if not effective on the date of filing: _____
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

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).

All members have unanimously agreed that the company should be dissolved.

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

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:

Hope D. Donald
Signature

Hope D. Donald
Printed Name

FILING FEE: \$25.00

14 DEC 12 PM 12:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED