

W09 0000048164

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

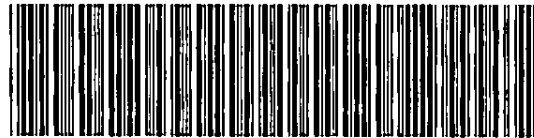
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Q. SILAS
JUN 16 2022

Office Use Only



500384589445

04/21/22--01010--005 **25.00

FILED
APR 21 PM 1:20
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RJT Rentals and Realty 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:

Lana J Jobe

(Name of Person)

RJT Rentals and Realty LLC

(Firm/Company)

13601 McGregor Blvd Suite 17

(Address)

Fort Myers FL 33919

(City/State and Zip Code)

For further information concerning this matter, please call:

Lana J Jobe

(Name of Person)

at (

239)

277-1729

(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 Address:

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

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

2009 APR 21 PM 1:25

SECRETARY OF STATE
TALLAHASSEE, FL

1. The name of a limited liability company is

RIS Rental and Realty LLC

2. The Articles of Organization were filed on Oct 20, 2011 and assigned

document number LO9000048164

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)

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).

Disabling health of operating manager Rodney Jobe

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

Lana J. Jobe

9770 Casa Mar Circle

Fort Myers FL 33919

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:

Lana Jobe
Signature

Lana Jobe
Printed Name

FILING FEE: \$25.00