

L09000050190

(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



100293303791

12/19/16--01021--009 \*\*25.00

FILED  
2016 DEC 19 PM 4:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY

DEC 21 2016

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** JJ Carmack 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:

James Carmack  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

6643 Fawn Meadow LN  
(Address)

Hoschton, GA 30543  
(City/State and Zip Code)

For further information concerning this matter, please call:

James Carmack at 770 535-8117  
(Name of Person) (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**

FILED  
2016 DEC 19 PM 4:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

JJ Carmack LLC

2. The Articles of Organization were filed on March 16, 2009 and assigned

document number LD9000050190

3. The delayed effective date the dissolution if not effective on the date of filing: Dec 20, 2016  
(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).

Condo was sold at Inn @ Summerwind  
#305 at Navarre Beach

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

James Carmack  
6643 Fawn Meadow LN  
Hoschton GA 30548

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:

James Carmack James Carmack  
Signature Printed Name

**FILING FEE: \$25.00**