

LOG 000055850

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 617-6383

From:
Account Name : REZLEGAL, LLC
Account Number : I20140000033
Phone : (904) 567-1177
Fax Number : (904) 567-1066

**LLC DISSOLUTION OR WITHDRAWAL
FIRST COAST RUGS, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

FILED
17 MAY -8 AM 7:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF DISSOLUTION

FOR

FIRST COAST RUGS, LLC

1. The name of the limited liability company as currently filed with the Florida Department of State is First Coast Rugs, LLC (the "Company").
2. The Articles of Organization were filed on June 9, 2009 and assigned document number L09000055850.
3. Dissolution of the Company was unanimously approved as of April 17th, 2017 by the consent of the sole Member of the Company. The number of votes cast for dissolution was sufficient for approval. Dissolution of the Company shall be effective immediately.
4. All debts, liabilities and obligations of the Company have been paid or discharged.
5. All remaining property and assets have been distributed to the sole Member in accordance with its respective rights and interests.
6. There are no suits pending against the Company in any court.

The undersigned, being the sole Member of the Company, hereby approves the above Articles of Dissolution this 28th day of April, 2017.


Robert L. Ellis, sole Member

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Notice of Limited Liability Company Dissolution

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F. S.

This "*Notice of Limited Liability Company Dissolution*" is optional and is not required when filing a voluntary dissolution

Name of Limited Liability Company: First Coast Rugs, LLC

Document Number of Limited Liability Company is: L09000055850

Date of Dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

Description of information that must be included in a written claim:

Date of event giving rise to claim.

Nature of claim/description of event giving rise to claim.

Amount of claim.

Name and contact information of claimant.

Copies of any written agreement or other documentation supporting claim.

Mailing address where claims can be sent: (claims cannot be sent to the Division of Corporations)

Robert L. Ellis
129 Deer Cove Drive
Ponte Vedra Beach, Florida 32082

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.


Robert L. Ellis, sole Member

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