

2090000 90358

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

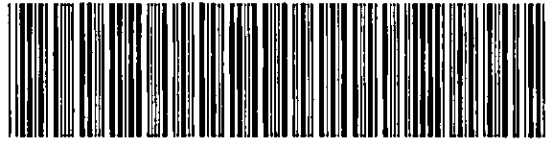
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2019 FEB -6 PM 6:14

SECRETARY OF STATE  
TALLAHASSEE, FL

R. WHITE  
FEB 13 2019



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CHEFFER HAGAN

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ATTORNEYS AT LAW

M. Brian Cheffer  
Samuel J. Hagan, IV

2120 McGregor Blvd.  
Fort Myers, FL 33901  
Telephone: 239-334-1381  
Facsimile: 239-334-0266

**M E M O R A N D U M**

TO: Registration Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

FROM: M. Brian Cheffer, Esq.

RE: Wyman Stokes Builder LLC

DATED: February 4, 2019

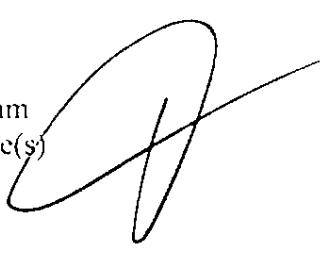
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Dear Sir/Madam:

Enclosed please a Statement of Termination for Wyman Stokes Builder LLC Also, enclosed please find a check in the amount of \$55.00 (\$25.00 processing fee and \$30.00 certified copy request).

If you should have any questions, please feel free to contact me.

MBC/cmm  
Enclosure(s)



**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Wyman Stokes Builder 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:

M. Brian Cheffer, Esq.

Name of Person

Cheffer & Hagan, P.A.

Firm/Company

2120 McGregor Boulevard

Address

Fort Myers, FL 33901

City/State and Zip Code

pats@wymanstokesbuilder.com

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

For further information concerning this matter, please call:

M. Brian Cheffer, Esq. at (239) 334-1381  
Name of Person Area Code Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

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

## STATEMENT OF TERMINATION

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

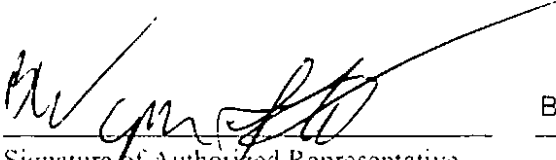
FIRST: The name of the limited liability company is: Wyman Stokes Builder LLC

SECOND: The Florida Document number of the limited liability company is: L09000090358

THIRD: The date of filing of the initial articles of organization is: September 18, 2009

FOURTH: The date of filing of the dissolution is: 1/31/19

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

  
Signature of Authorized Representative

B. Wyman Stokes (Manager)

Typed or printed name of signature

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

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TALLAHASSEE, FL