

LO9000095568

(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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2014 JUN -6 AM 7:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN - 9 2013

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SGT. PEP., 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:

JILL PATTERSON

(Name of Person)

(Firm/Company)

P.O. BOX 372289

(Address)

KEY LARGO FL 33037

(City/State and Zip Code)

For further information concerning this matter, please call:

JILL PATTERSON

(Name of Person)

at (305) 395 2949

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

MONEY ORDER # 21441924966 SENT
FOR \$35.00 PLEASE SEND
REFUND TO ABOVE

— \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 14, 2014

JILL PATTERSON
P O BOX 370345
KEY LARGO, FL 33037

SUBJECT: SGT. PEP., LLC
Ref. Number: L09000095568

We have received your document for SGT. PEP., LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton
Regulatory Specialist III

Letter Number: 814A00010380

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

SGT. PER., LLC

2. The Articles of Organization were filed on 10/05/2009 and assigned

document number LO9000095568

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).

VOLUNTARY DISSOLUTION

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

JILL PATTERSON

P.O. BOX 372289

KEY LARGO FL 33037

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:

Jill Patterson

Signature MANAGER

JILL PATTERSON

Printed Name

FILING FEE: \$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 JUN -6 AM 7:48

FILED