

LIC 000018022

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

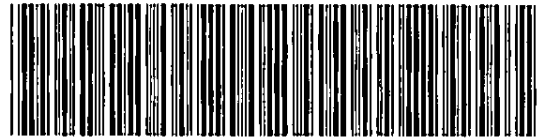
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/15/19--01028--032 **25.00

FILED
19 APR 15 PM 4:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 22 2019

T SCHROEDER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Circular Geometry Studios 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:

Michael Schuman
(Name of Person)

Circular Geometry Studios LLC
(Firm/Company)

8112 Claire Ann Drive #103
(Address)

Orlando, FL 32825
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Schuman
(Name of Person)

239 980-4746
(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 32304

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2111 Bay Street, Suite 200
Tallahassee, FL 32304

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

1. The name of a limited liability company is

Circular Geometry Studios LLC

2. The Articles of Organization were filed on 2-16-19 and assigned

document number L10000214022

3. The delayed effective date the dissolution if not effective on the date of filing: 3/27/19
(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).

Company was designed to do contract work in conjunction with a state university for educational games via

contract. Contract was never filled and company never conducted business or had employees outside of

both owning partners. 2nd owning partner has moved and has had no impact on business for years.

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

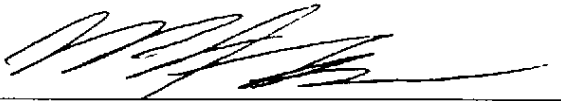
Michael Schuman

8112 Claire Ann Drive #103

Orlando, FL 32825

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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:



Signature

Michael R Schuman

Printed Name

FILING FEE: \$25.00