

L10000051349

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☒ MAIL

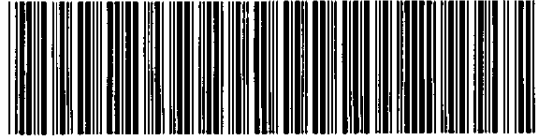
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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03/27/18--01006--015 **50.00

RECEIVED
DEPARTMENT OF STATE
18 MAR 27 AM 11:42

18 APR -3 AM 9:49
U.S. DEPARTMENT OF STATE
RECEIVED

Y SULKER

APR 03 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 28, 2018

DENNIS TOBER
7926 TALLY ANN DR
TALLAHASSEE, FL 32311

SUBJECT: DMT BACK FORTY, LLC
Ref. Number: L10000051349

We have received your document for DMT BACK FORTY, LLC and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 118A00006231

RECEIVED
DEPARTMENT OF STATE
18 APR -3 PM 2:23

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DMT Back Forty, LLC (Dissolution)

DOCUMENT NUMBER: L10000051349

The enclosed **Notice of Limited Liability Company Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dennis Tober

(Name of Contact Person)

DMT Back Forty

(Firm/Company)

7926 Tally Ann Dr

(Address)

Tallahassee FL 32311

(City/State and Zip Code)

For further information concerning this matter, please call:

Dennis Tober

(Name of Contact Person)

at (850)

(Area Code)

509 6932

(Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

(Additional copy is enclosed)

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

(Additional copy is enclosed)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

DMT Back Forty

2. The Articles of Organization were filed on 5/12/2010 and assigned

document number 100000 51349

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)

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).

No longer in business

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

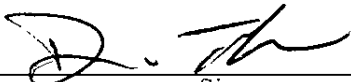
Dennis Tober

7926 Tally Ho Dr

Tallahassee FL 32311

18 APR 2 4 19
TALLAHASSEE
FLORIDA

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

4/3/18

Printed Name

FILING FEE: \$25.00