L14 0000 62409

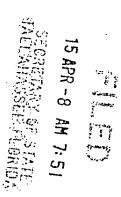
(Re	questor's Name)	<u></u>
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	

Office Use Only



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04/08/15--01018--015 **25.00



J. SHAVETS APR 22 MT



COVER LETTER *

	Registration Section Division of Corporations		
SUBJEC	Mortellaro & Quigley CPAs LLC		
SUBJEC		d Liability Compan	у)
	osed Articles of Dissolution and fee(s) are submitte turn all correspondence concerning this matter to the	_	
	Edward J Quigley Jr CPA		
(Name of Person)			
Mortellaro & Quigley CPAs LLC			
(Firm/Company)			
	P O Box 509		
	(A	ddress)	
	Lutz, Florida 33548-0509		
	(City/State	e and Zip Code)	
For furth	er information concerning this matter, please call:		
	Edward J Quigley	813 at (784-5957
•	(Name of Person)	(Area Cod	de & Daytime Telephone Number)
Enclosed	is a check for the following amount:		
✓ \$25.00 Filing Fee and Certificate of Dissolution			Fee, Certificate of Dissolution & py (additional copy is enclosed)
	MAILING ADDRESS: Registration Section Division of Corporations	Regis	ET/COURIER ADDRESS: tration Section on of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liab	ility company is		
	Mortellaro & Quigley	CPAs LLC		·
2.	The Articles of Organizati	on were filed on Au	gust 5, 2010	and assigned
	document number L1000	0082409		
3.	The delayed effective date (effective	the dissolution if not re date cannot be prior to o	t effective on the date or more than 90 days later	of filing: April 15, 2015 than date document is received for filing)
4.	A description of occurrence 605.0707, Florida Statutes,	ce that resulted in the (copy 605.0707 on b	limited liability comp back cover letter).	pany's dissolution pursuant to section
	The business that was	conducted by the	LLC was termina	ited and the two members
	each went there own	way.		
5.	If there are no members, e	nter the name and ade	dress of the person ap	pointed to wind up the company's
	activities and affairs:	Edward J Quig	ley Jr CPA	
		P O Box 509		
		Lutz, Florida 33	3548-0509 ⁻	
6. lis	Signature of an authorized above to wind up the co	person or if there are ompany's activities as	e no members, the sig nd affairs:	nature of the person appointed and
_	Count 12.		Edward J Q	ujalav Ir
	College Dec	Jeg / ·	Edward J Q	Printed Name
	- (/ / /		

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

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: Mortellaro & Quigley CPAs LLC
Docume	nt number of Limited Liability Company is: L10000082409
Date of o	dissolution was: April 15, 2015
	ion of information that must be included in a written claim:
Name,	address, phone number of claimant and a description of the claim.
	APR
Mailing	address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
	Edward J Quigley Jr. CPA
-	P O Box 509
-	Lutz, Florida 33548-0509
-	
	against the above named limited liability company will be barred unless a proceeding to enforce the commenced within 4 years after the filing of this notice.
Edward	d J Quigley Jr. Course Dury b.
	Printed Name of the Person Filing Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00