## [10000085/83

(Re	questor's Name)			
· (Ad	dress)			
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(Cit	ty/State/Zip/Phone	e #)		
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(Bu	siness Entity Nam	ne)		
(Document Number)				
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APR 21 2015 S. YOUNG



March 4, 2015

JACQUELINE WILSON 6815 BISCAYNE BLVD #125 MIAMI, FL 33138

SUBJECT: PLATFORM, J.G ART. GALLERY "L.L.C."

Ref. Number: L10000085183

We have received your document for PLATFORM, J.G ART. GALLERY "L.L.C." and your check(s) totaling \$35.00. 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.

Shelia H Young Regulatory Specialist II

Letter Number: 815A00004500

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PLATFORM, J.G ART GALLERY L.L.C. Jacqueline Wilson 6815 Biscayne Blvd PO Box 125 Miami FL 33138

January 31 2015

State of Florida Division of Corporation PO Box 6327 Thallahasse, FL 32314

Ref: Dissolution of the LLC L10000085183

Madam/Sir

Please find attached the form and payment for the dissolution of PLATFORM JG ART GALLERY LLC that had also the fictitious name JAKY WILSON (Document G1300012498).

Regards,

Jacqueline Wilson

FILEU # \$ 30 F \$

## **COVER LETTER**

**TO:** Registration Section

Division of Corporations
SUBJECT: DISSOLUTION OF THE "UC"
DOCUMENT NUMBER:
The enclosed Notice of Limited Liability Company Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Please return all correspondence concerning this matter to the following:  (Name of Contact Person)    Contact Person   Conta
(Name of Contact Person)
J.G. ART PLATFORM GALLERY
(Firm/Company)
G850 BISCAYNE BLUD # 12501 (Address)
(Address)
(Address) Mi A Mi , FL 33138
(City/State and Zip Code)
For further information concerning this matter, please call:
TREQUELINE WILSON at (239) 887 OT 11
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
■\$25 Filing Fee □ \$30 Filing Fee & □ \$55 Filing Fee & □ \$60 Filing Fee,
Certificate of Status Certified Copy Certificate of Status & (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: STREET ADDRESS:
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

I talked to thelea Yerry on April 16, 2015

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

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DISSOLUT SUBJECT:	ION of PLATFO	RM JG Art Gallery LLC		
DOCUMENT NUMBE	L100000851	83		<del></del>
The enclosed Articles of	Dissolution and	fee are submitted for filing	g.	
Please return all correspo	ndence concernin	g this matter to the follow	ving:	
Jacqueline Wilson				
	(Name of	Contact Person)		
JGPlatform gallery				
	(Fin	m/Company)	-1.2	
6815 Biscayne Blvd #1	25			四 一
	(A	ddress)	,	₩ E
Miami, FL 33138				B 20 PH S
	(City/Sta	ate and Zip Code)	5.1	्रा
For further information co	oncerning this ma	atter, please call:	s Žen	30
		at ( <u>239</u> )_	887 8511	
(Name of Cont	act Person)	(Area Code &	Daytime Telephone	Number)
Enclosed is a check for th	e following amou	unt:		
\$35 Filing Fee 🗅 \$43 Cert	.75 Filing Fee & ificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of State Certified Copy (Additional copy i enclosed)	ıs &
MAILING ADDR	ESS:	STRE	EET ADDRESS:	

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

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

## Notice of Limited Liability Company Dissolution

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: J.G. ART PLATTERM GALLERY "ULC"
Document number of Limited Liability Company is: 100000 85183
•
Date of dissolution was: $12/\sigma 1/2014$
Description of information that must be included in a written claim:
•
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
winning address where claims can be sent. (Claims cannot be sent to the Division of Corporations)
GOTO SISCHIE SLVO # RT 33138
A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
\ \ \ \ ()
JACQUELINE WILSON
Printed Name of the Person Filing Signature of the Person Filing