

L100000 88368

(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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BUREAU OF CORPORATIONS
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2014 JUL 17 PM 3:23

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**CORPORATE
ACCESS,
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WALK IN

PICK UP: 7-17-14

- ☒ CERTIFIED COPY _____
- ☐ PHOTOCOPY _____
- ☐ CUS _____
- ☒ FILING Dissolution

1. Breen Enterprises LLC
(CORPORATE NAME AND DOCUMENT #)
2. _____
(CORPORATE NAME AND DOCUMENT #)
3. _____
(CORPORATE NAME AND DOCUMENT #)
4. _____
(CORPORATE NAME AND DOCUMENT #)
5. _____
(CORPORATE NAME AND DOCUMENT #)
6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Breen Enterprises LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and Bylaws are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jamie Bunkley

(Name of Person)

Tax Savers

(Firm Company)

1300 Enterprise Drive Unit A

(Address)

Port Charlotte, FL 33953

(City, State and Zip Code)

For further information concerning this matter, please call:

Jamie Bunkley

(Name of Person)

941

625-1925

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

☒ \$75.00 Filing Fee, Certificate of Dissolution &
Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6827
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Chifon Building
2061 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is
Breen Enterprises LLC
2. The Articles of Organization were filed on August 23, 2010 and assigned
document number L10000088368
3. The delayed effective date the dissolution is not effective on the date of filing 5/1/2014
(effective date cannot be prior to or more than 90 days past this 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)
Termination of operations.

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

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

Jon P. Breen
Signature

Jon P Breen
Printed Name

FILING FEE: \$25.00

FILED
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