

L10000095901

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

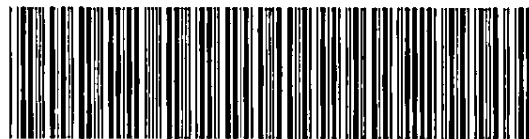
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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17 DEC 29 AM 7:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STEPHEN M. BLACKBURN
Attorney at Law

412 Northeast 4th Street
Fort Lauderdale, Florida 33301

Telephone: (954) 463-5266, Ext. 2102
Facsimile: (954) 463-2020

December 27, 2017

*Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314*

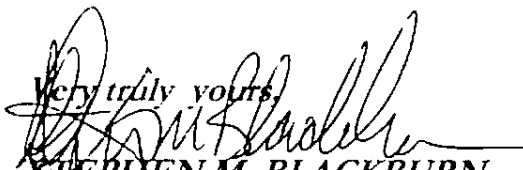
**RE: - JMAR PROPERTY, LLC
- PROPERTY LOSS RECOVERY COMPANY, LLC**

Dear Division of Corporations,

*Please find enclosed herewith my check number 4959 in the amount of
\$ 50.00 to file the enclosed :*

- 1. Articles of Dissolution For PROPERTY LOSS RECOVERY
COMPANY, LLC. and*
- 2. Articles of Dissolution for JMAR PROPERTY, LLC.*

*Please file same as soon as possible and send confirmation of the filings to
the LLCs. Thank you.*

Very truly yours,

STEPHEN M. BLACKBURN
Attorney at Law

SMB/no

COVER LETTER

TO: Registration Section
Division of Corporations

PROPERTY LOSS RECOVERY COMPANY, LLC

SUBJECT: _____
(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:

Stephen M. Blackburn

(Name of Person)

Attorney at Law

(Firm/Company)

412 N.E. 4th Street

(Address)

Ft. Lauderdale, Florida 33301

(City/State and Zip Code)

For further information concerning this matter, please call:

Stephen M. Blackburn, Attorney at (954) 463-5266

(Name of Person) (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 32314

STREET/COURIER ADDRESS:
Registration 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
PROPERTY LOSS RECOVERY COMPANY, LLC
2. The Articles of Organization were filed on September 13, 2010 and assigned
document number L10000095901.
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).
Consent of all members.

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:


Signature

ROSALIE MARIE SANTELLI

Printed Name

FILING FEE: \$25.00

RECEIVED
DEPT. OF STATE
TALLAHASSEE, FLORIDA
17 DEC 29 AM 7:25