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(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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2017 AUG -4 PH 12: 38

1. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: J. LEWA ENTERPRISES LC. (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:			
JOSEPH A. LEMA (Name of Person)			
J. LEMA EXTENDUSED LLC (Firm/Company)			
9760 VANDEWE, LT DU			
NAMES FL 34/08 (City/State and Zin Code)			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Joseph A LEMA at (239) 207 5408 (Name of Person) (Area Code & Daytime Telephone Number)			
(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:

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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



July 13, 2017

JOSEPH A LEMA 9760 VANDERBILT DR NAPLES, FL 34108

SUBJECT: J LEMA ENTERPRISES, LLC

Ref. Number: L10000114468

Upon receipt of your letter and/or check(s) totaling \$25.00, no document was found. Please send your document with any fees due to:

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

Please return a copy of this letter to ensure your money is properly credited.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 017A00014232

RECEIVE MITAUG-4 AM II: TO SECRETAIN OF STATE ALLAHASSEE, FLORIDA 2017 AUG -4 PH 12: 38

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liabi	lity company is
J. LEUIA E	N/Engarses, La
2. The Articles of Organization	on were filed on NOVINER 2010 and assigned
document number	0000 114468
(effective Note: If the date inserted in	the dissolution if not effective on the date of filing:
605.0707, Florida Statutes.	e that resulted in the limited liability company's dissolution pursuant to section (copy 605.0707 on back cover letter).
ON JANUARY	38, 2017, be eause of Finaveril
lessons, I cl	LOCED MY LLC.
•	
 	
5. If there are no members, en	nter the name and address of the person appointed to wind up the company's
activities and affairs:	JOSEPH A. LEUYA
	A 55 22
6. Signature of an authorized listed above to wind up the co	person or if there are no members, the signature of the person appointed and impany's activities and affairs:
11100	JOSEPH A LEWA!
Signature	Printed Name 1. Co
/ / // Signature	Timed Plante

FILING FEE: \$25.00