

L110000006165

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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17 FEB -2 PM 3:01  
SHARON J. JONES, CLERK

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FEB 06 2017



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 13, 2017

DAVID SCHLOTTMAN  
21733 BELVEDERE LN  
ESTERO, FL 33928

SUBJECT: CFO EDGE, LLC  
Ref. Number: L11000006165

2017 FEB -2 PM 1:28  
RECEIVED  
TALLAHASSEE, FLORIDA

We have received your document for CFO EDGE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list description of information that must be included in a written claim on page 2.

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.

Octavia I Simmons  
Regulatory Specialist II

Letter Number: 617A00000810

See comments added  
to Page 2.

David Schlottman  
239-682-9450  
1/28/17

[www.sunbiz.org](http://www.sunbiz.org)

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CFO EDGE, LLC  
(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:

David Schlottman

(Name of Person)

CFO EDGE, LLC

(Firm/Company)

21733 Belvedere Lane

(Address)

Estero, FL 33928

(City/State and Zip Code)

For further information concerning this matter, please call:

David Schlottman

(Name of Person)

at ( 239 ) 682-9450

(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  
CFO EDGE, LLC

2. The Articles of Organization were filed on 01/14/2011 and assigned  
document number LJ1000006165

3. The delayed effective date the dissolution if not effective on the date of filing: 12/30/2016  
(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).  
Company will cease doing business.

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

David Schlottman

Printed Name

**FILING FEE: \$25.00**

FILED

17 FEB -2 PM 3:01

## 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: CFO EDGE, LC

Document number of Limited Liability Company is: L11000006165

Date of dissolution was: 12/30/2016

Description of information that must be included in a written claim:

Name, address, date of alleged occurrence,  
description of events, copies of correspondence  
and receipts.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations):

21733 Belvedere Lane

Estero, FL 33928

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.

David Schlottman

Printed Name of the Person Filing

David Schlottman

Signature of the Person Filing

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

FILED

17 FEB -2 PM 3:01

David Schlottman  
1/28/16