111000009094

(Requestor's Name)						
(Address)						
(Address)						
(Cin/State/Tin/Dhone #)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



000308405810

02/05/18--01018--007 **25.00

DIVISION OF CORPORATIONS

18 FFR - S PH 2: 37

K. SALY FEB 6 2018

COVER LETTER

TO:

Registration Section Division of Corporations

SMJ TOWING SERVICES, 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 JOENS						
(Name of Person)						
(Firm/Company)						
7309 INVERNESS COURT						
(Address)						
WEEKI WACHEE, FLORIDA 34613						
(City/State and Zip Code)						

For further information concerning this matter, please call:

STEPHEN JOENS

_,352

232-2236

(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 liabil SMJ TOWING SERVICES,		*****	 		
2.	The Articles of Organization	n were filed on 01/21.	/2011	_ and assigned		
	document number L110000	09094				
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 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). NO LONGER IN BUSINESS					
		_	·			
5.	If there are no members, en activities and affairs:	enter the name and address of the person appointed to wind up the company's STEPHEN JOENS				
		7309 INVERNESS	COURT			
		WEEKI WACHEE, F	FLORIDA 34613			
6. lis	Signature of an authorized sted above to wind up the co	person or if there are n npany's activities and	no members, the signature of affairs:	f the person appointed and		
	Stap/	Mlass	STEPHEN M. JOENS			
	Şignature	FILING	Printed G FEE: \$25.00	l Name		