

L11000010849

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

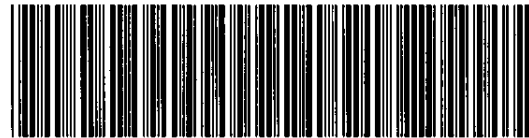
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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01/15/15--01008--017 **25.00

FILED

2015 JAN 15 PM 3:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 29 2015
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Omni Valet Services 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:

John Daniels

(Name of Person)

Omni Valet Services LLC

(Firm/Company)

1100 SE 14 Street

(Address)

Deerfield Beach, FL 33441

(City/State and Zip Code)

For further information concerning this matter, please call:

John Daniels

(Name of Person)

305

at ()

710-7819

(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:

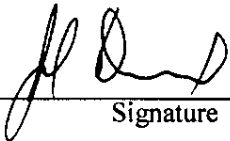
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
Omni Valet Services LLC
2. The Articles of Organization were filed on 01/26/2011 and assigned
document number L11000010849
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)
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).
I started a new company called Omni VAlet Service Incorporated

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: John Daniels
1100 SE 14 Street
Deerfield Beach, FL 33441

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

JOHN DANIELS
Printed Name

FILING FEE: \$25.00

2015 JAN 15 PM 3:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED