

#L11000017250

(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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2014 APR 14 PM 5:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

APR 15 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dissolution of Xyberline LLC

DOCUMENT NUMBER: L11000017250

The enclosed **Notice of Limited Liability Company Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Steve Jones

(Name of Contact Person)

(Firm/Company)

6328 Flamingo Dr.

(Address)

Apollo Beach, Florida 33572

(City/State and Zip Code)

For further information concerning this matter, please call:

Steve Jones

(Name of Contact Person)

at (813)

(Area Code)

334-5912

(Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

(Additional copy is enclosed)

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

(Additional copy is enclosed)

MAILING ADDRESS:

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

STREET ADDRESS:

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

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

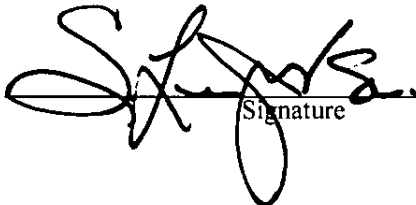
2014 APR 14 PM 5:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
Xyberline LLC
2. The Articles of Organization were filed on February 9th, 2011 and assigned
document number L11000017250
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).

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: Steve Jones Sr.
6328 Flamingo Dr.
Apollo Beach, Florida 33572

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

Steve Jones Sr.

Printed Name

FILING FEE: \$25.00