110000039931

(Re	equestor's Name)	_
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



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01/26/12--01001--011 **7.50

01/17/12--01037--014 **52.50

SECRETATION OF STATE.

3AN 215 2012 T. HAMPTON

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: THOMAS MR JAMES 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:
THOMAS, JAMES (Name of Person)
(Firm/Company) 3/65 N. ATLANTIC AUE APT C-108 (Address) Cocoa BEACH FL 32931
COCOA BEACH FL 32931 (City/State and Zip Code)
For further information concerning this matter, please call:
Tom James at (321) 795-9595 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate of Status Certificate of Status & Certificate of Status & Certificate of Status & Certificate of Status & Certificate Opy (additional copy is enclosed) BALANCE OWED 7.50

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



RECEIVED

12 JAN 24 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

January 18, 2012

THOMAS JAMES 3165 N ATLANTIC AVE APT C-108 COCOA BEACH, FL 32931

SUBJECT: THOMAS M.R. JAMES, LLC

Ref. Number: L11000029931

We have received your document for THOMAS M.R. JAMES, LLC and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$7.50. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 012A00001243

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILE) SECRETARY OF STATE DIVISION OF CORPORATIONS

12 JAN 24 PM 3: 20

1. The name of a limited liability company is	
THOMAS MR JAMES	S LLC.
2. The Articles of Organization were filed on	-15- 2011 and assigned document number
L11000029931	
3. The date the dissolution was approved:/2-	3x - Z011
4. A description of occurrence that resulted in the limi 608.441, Florida Statutes. (copy 608.441 on back co	ited liability company's dissolution pursuant to section over letter).
	TER JENDING You LLC
PAPERIDORY, No INCOM	ME WAS RECEIVED (SELF EMPLOY.
BY ME FOR TAX YEAR	2011.
5. CHECK ONE:	·
	limited liability company have been paid or discharged.
-OR- Adequate provision has been made for the	debts, obligations and liabilities pursuant to s. 608.4421.
•	outed among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the com	pany in any court.
-OR- Adequate provision has been made for the sentered against it in any pending suit.	satisfaction of any judgment, order or decree which may be
gnatures of the members having the same percentage of	f membership interests necessary to approve the dissolution:
Signature	Printed Name
Thomas MR James	Turne ma Tours
The Marie 11 (12) from the same of the sa	THOMAS MR JAMES