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(Requestor's Name)		
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SECRETARY OF STATE

### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT:

JUPO Investments, 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:

Julian D. Saul

(Name of Person)

JUPO Investments, LLC

(Firm/Company)

8 Ocean DR, Jupiter Inlet Colony

(Address)

Tequesta, FL 33469 US

(City/State and Zip Code)

For further information concerning this matter, please call:

Julian D. Saul

<sub>ar</sub> 706 \ 529-190

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

ρ \$25.00 Filing Fee

ρ \$30.00 Filing Fee & Certificate of Status  \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ρ \$60.00 Filing Fee, Certificate of Status & 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

FILED

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## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

SECRETARY OF STATE TALLAHASSEE, FLORIDA

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).		
ability company		
company have been paid or discharged.  as and liabilities pursuant to s. 608.4421.		
nembers in accordance with their respective		
rt.		
ny judgment, order or decree which may be		
terests necessary to approve the dissolution:		
Printed Name		
an D. Saul, Manager and Member		
uli:		

FILING FEE: \$25.00