L110000 68604

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Rusiness Entity Name)
(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: TJJ Global Of SWFL 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:

TAMMY KEIN
(Name of Person)

TO I Global of SWFL // (Firm/Company)

8909 Cypress Preserve Place
(Address)

Fort Myers FL 33912
(City/State and Zip Code)

For further information concerning this matter, please call:

TAMMY KORN at (239) 292-8262 (Nume 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 Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is	
	TOT GIODAR IT SWFL, LLC	
2.	The Articles of Organization were filed on $C(c-)C-C(c-)$ and assigned	
	document number L11000068604	
3.	The delayed effective date the dissolution if not effective on the date of filing: Note: 1 (effective date cannot be prior to or more than 90 days later than date document is received for filing) Note: 1 (fine date inserted in this block does not meet the applicable statutory filing requirements, this date will not be 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).	
	The business proposition never	
	The business proposition never presented itself. No need falli.	
5.	If there are no members, enter the name and address of the person appointed to wind up the company's	
	activities and affairs:	
	8909 Cypress Proserve Fort Meyers FL. 339/2	
	· ·	
6. at	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:	
- -	January Kerror Signature Printed Name	
FILING FEE: \$25.00		