

41000094504

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

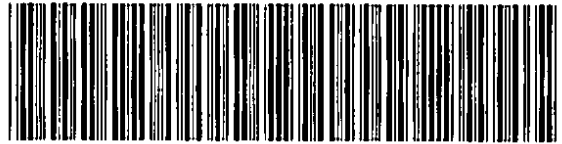
(Document Number)

Certified Copies _____ Certificates of Status _____

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01/03/19--01007--005 \$425.00

RECEIVED

JAN 02 2019

FILED
2019 JAN 24 AM 10:00
TALLAHASSEE, FL

C. GOLDEN

JAN 26 2019

COVER LETTER

TO: Registration Section
Division of Corporations

FLOYO CORAL GABLES LLC

SUBJECT: _____
(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:

JAMES MOONEY

(Name of Person)

(Firm/Company)

2117 MODENA CT

(Address)

NAPLES, FL 34105

(City/State and Zip Code)

For further information concerning this matter, please call:

JAMES MOONEY

239

301-0304

(Name of Person)

at (_____) _____
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 11, 2019

JAMES MOONEY
2117 MONDENA COURT
NAPLES, FL 34105

SUBJECT: FLOYO CORAL GABLES LLC
Ref. Number: L11000094504

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707(1)(c), Florida Statutes, must be contained in the document.

Please return 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) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 619A00000909

January 21, 2019

Florida Department of State
Division of Corporations
ATTN: Claretha Golden
P.O. Box 6327
Tallahassee, Florida 32314

RE: FLOYO CORAL GABLES LLC
REF. NUMBR: L11000094504

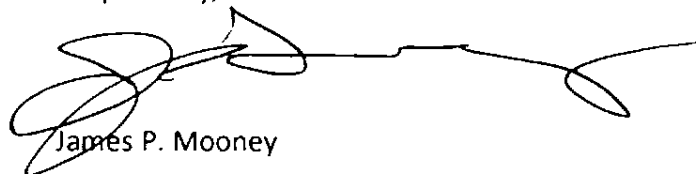
Dear Ms. Golden:

I am receipt of your letter dated January 11, 2019 advising the noncompletion of processing for the dissolution of FloYo Coral Gables LLC, document number L11000094504, for purported failure of compliance with Fla. St. § 605.0707(1)(c).

I have enclosed the original filing with emphasis added to Section 4, which clearly states on the original filing that the LLC has requested "Dissolution in accordance with FL. Stat. §605.0701(s) pursuant to Member Resolution in Writing dated December 18, 2018", which satisfies the requirements in § 605.0707(1)(c).

Please advise if any additional documentation is necessary. If you have any questions, please contact Mary Todd at (239) 307-8877.

Respectfully,



James P. Mooney

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

FILED

2019 JAN 24 AM 10:00

**SECRETARY OF STATE
TALLAHASSEE, FL**

1. The name of a limited liability company is
FLOYO CORAL GABLES LLC


2. The Articles of Organization were filed on 08/17/2011 and assigned
document number L11000094504

3. The delayed effective date the dissolution if not effective on the date of filing: 12/31/2018
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
Note: If the 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).
Dissolution in accordance with FL Stat. § 605.0701(s) pursuant to Member Resolution in Writing dated
December 18, 2018.

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs:

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

James P. Mooney

Printed Name

FILING FEE: \$25.00