

L11000101370

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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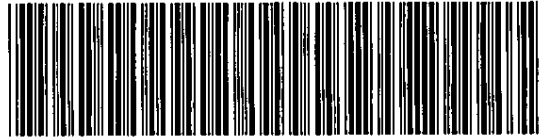
(Business Entity Name)

(Document Number)

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2017 FEB 10 PM 4:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY

FEB 13 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Landcmtravel Agency 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:

Cryshan Muhammad
(Name of Person)
Landcmtravel Agency LLC
(Firm/Company)
49 West 58th Street
(Address)
Jacksonville, FL 32208
(City/State and Zip Code)

For further information concerning this matter, please call:

Cryshan Muhammad at 904, 887-7917
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee and Certificate of Dissolution
CM

☒ \$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

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

2017 FEB 10 PM 4:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Landctravel Agency LLC

2. The Articles of Organization were filed on July 21, 2011 and assigned

document number 611000073012 L11000101370

3. The delayed effective date the dissolution if not effective on the date of filing: 2-13-2017
(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).

The buisness wqs not able to get up
and properly. No income since the
business was partially open.

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

Cryshan Muhammad

49 West 58th Street

Jacksonville, FL 32208

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:

Cryshan Muhammad
Signature

Cryshan Muhammad
Printed Name

FILING FEE: \$25.00