

L11000 10/10/16

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

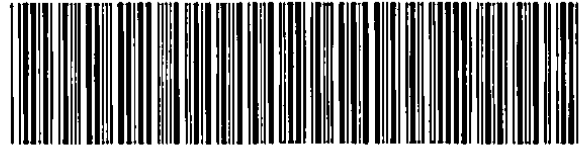
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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05/24/19-01015--028 **25.00

FILED
2019 MAY 24 PM 12:29
TOLSON/SECRET/CLERK

RECEIVED
JUL 1 1997

Deborah Ann Roy-Thalmann
715-N. Macewen, LLC
715 N. Macewen Drive
Osprey, FL 34229
May 21, 2019

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

RE: Doc #: L1100010616

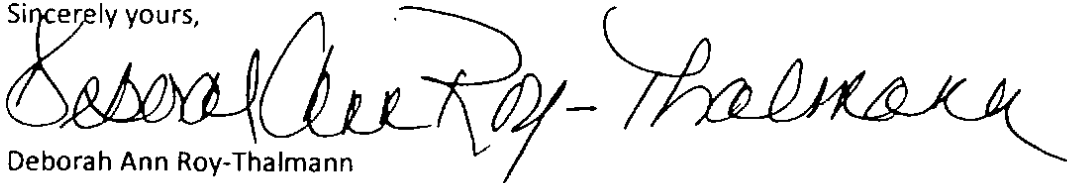
Enclosed please find completed paperwork to dissolve NIXE, LLC and a check in the amount of \$25.00 effective immediately. We are no longer doing any business.

I listed both August 23, 2011, 2011 as the date the Articles of Organization were filed as this is the date on our lawyer's letter, however I also listed September 11, 2011 as I have that date from the State of Florida so I am not clear which date is the correct one.

Kindly process and send a copy of the dissolution for our files.

Thank you for your attention to this request.

Sincerely yours,

A handwritten signature in black ink, appearing to read "Deborah Ann Roy-Thalmann", written in a cursive style.

Deborah Ann Roy-Thalmann

Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NIXE, 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:

SEBORAH ANN ROY-THALMANN
(Name of Person)

NIXE, LLC
(Firm/Company)

715 N. MAC EWE DRIVE
(Address)

OSPREY, FL 34229
(City/State and Zip Code)

For further information concerning this matter, please call:

SEBORAH ANN ROY-THALMANN 941-918-9123
(Name 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

1. The name of a limited liability company is

NIXE, LLC

2. The Articles of Organization were filed on 9/11/2011 OR 8/23/11 and assigned

document number L11000101616

3. The delayed effective date the dissolution if not effective on the date of filing: _____
(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).

CLOSED - NO LONGER
DOING BUSINESS

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

VERORAH ANN ROY-THALMAN
715 N. MAC ARDEN DRIVE
OSPREY, FL 34229

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:

 VERORAH ANN ROY-THALMAN
Signature Printed Name

FILING FEE: \$25.00