

L11000128898

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

☐

WAIT

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MAIL

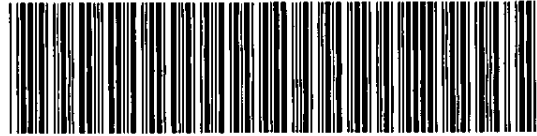
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04/21/14--01006--010 \*\*25.00

FILED  
2014 APR 21 PM 4:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Outgen APR 24 2014

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** JR FINANCIAL ENTERPRISES, 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:

JUAN CALLE

(Name of Person)

JR FINANCIAL ENTERPRISES, LLC

(Firm/Company)

3615 COLLINWOOD LN

(Address)

WEST PALM BEACH FL 33406

(City/State and Zip Code)

For further information concerning this matter, please call:

JUAN CALLE

(Name of Person)

at ( 561 ) 541-5222

(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

FILED

2014 APR 21 PM 4:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is  
JR FINANCIAL ENTERPRISES, LLC

2. The Articles of Organization were filed on 11/14/2011 and assigned  
document number L11000128898

3. The delayed effective date the dissolution if not effective on the date of filing \_\_\_\_\_

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).

COMPANY IS OUT OF 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:

JUAN CALLE

3615 COLLINWOOD LN

WEST PALM BEACH FL 33406

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

Printed Name

JUAN CALLE

FILING FEE: \$25.00