

111000139849

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2015-2 APR 15  
10:00 AM  
FBI

D. BRUCE  
MAY 23 2021

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: EMMAX CONSULTING, 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:

DR. MICHAEL NAGER

(Name of Person)

(Firm/Company)

SEESTR 64

(Address)

SCHONDORF, 86938 GERMANY

(City/State and Zip Code)

For further information concerning this matter, please call:

Dr. Michael Nager at ( 850 ) 376-4907  
(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 Address:**

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

FILED  
2021 MAR -2 PM 11:45  
CLERK OF COURT  
JULIE A. BROWN

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

1. The name of a limited liability company is  
EMMAX CONSULTING

2. The Articles of Organization were filed on DECEMBER 13, 2011 and assigned  
document number L11000139849

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).


ALL MEMBERS UNANIMOUSLY CONSENTED TO CEASING ALL BUSINESS OPERATIONS.

AND FORMALLY DISSOLVE THE ENTITY.

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:

X

  
Signature

DR. MICHAEL NAGER

Printed Name

**FILING FEE: \$25.00**

2021 DEC 13 2 41 PM  
CLERK OF THE COURT  
STATE OF FLORIDA  
TALLAHASSEE