

L12 0000 31319

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2016 JUN 20 PM 4:49  
TALLAHASSEE, FLORIDA

FILED  
2016 JUN 20 PM 4:37  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

JUN 21 2016

Y SULKER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: landscape lighting of central florida

(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:

john hyatt

(Name of Person)

landscape lighting of central florida

(Firm/Company)

924 inchon ct.

(Address)

orlando fl 32808

(City/State and Zip Code)

For further information concerning this matter, please call:

john hyatt

(Name of Person)

at 407 6189447

(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  
landscape lighting of central florida

2. The Articles of Organization were filed on aug 21, 2015 and assigned  
document number L12000031319

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).  
the business did not work out.

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

John Hyatt  
Printed Name

**FILING FEE: \$25.00**

FILED  
16 JUN 20 PM 4:37  
DEPT. OF STATE  
TALLAHASSEE, FLORIDA