

L12 000050814

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

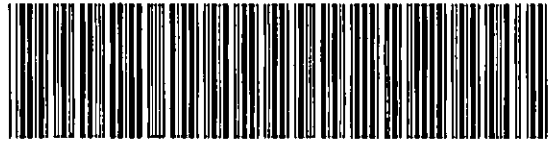
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



100341218471

04/17/20--01008--011 \*\*25.00

FILED

2020 APR 17 AM 7:10

CLERK OF SUPERIOR COURT  
JANUARY 1, 2020

APR 29 2020

S. YOUNG

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: GOMES PLACE LLC  
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

EDDY OGBEKHILY  
(Name of Person)

GOMES PLACE LLC  
(Firm/Company)

17607 SIMMONS ROAD  
(Address)

LUTZ FL 33548  
(City/State and Zip Code)

For further information concerning this matter, please call:

EDDY OGBEKHILY at (813) 506-1432  
(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

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

GOMES PLACE LLC

2. The Articles of Organization were filed on 4-13-2012 and assigned

document number 4-13-2012

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).

BUSINESS NO LONGER EXIST

2020 APR 17 AM 7:10  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
AND BUSINESS REGISTRATION

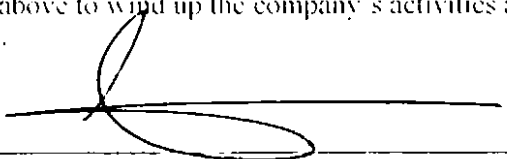
FILED

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

EDDY OGBERHLY

MATHURINE OGBERHLY

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

EDDY OGBERHLY  
Printed Name

FILING FEE: \$25.00