# 112000078565

(Re	questor's Name)		
(Ad	dress)		
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(Cit	ry/State/Zip/Phone	e #)	
PICK-UP	MAIT WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to	Filing Officer:		





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D. SCOTT JUL 1 4 2017

### **COVER LETTER**

TO:	Registration Section
	Division of Corporations

disolution of an 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:

Victoria Mossucco	
(Name of Person)	
Jomis Group LLC	
(Firm/Company)	
1513 Mayo Street	
(Address)	
Hollywood Fl 33020	
(City/State and Zip Code)	

For further information concerning this matter, please call:

# Victoria Mossucco

(Name of Person)

786 2859430

(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  Jomis Group LLC
2.	The Articles of Organization were filed on 10/20/2014 and assigned
	document number L12000078565
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 the members decided to pursue other interest
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 li	Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs:
	Victoria Mossucco
	Signature Printed Name
	FILING FEE: \$25.00