

L12 00 00 85760

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

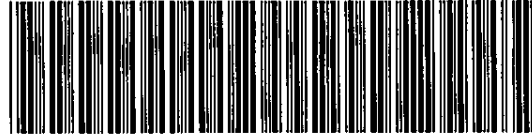
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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12/01/14--01032--022 **55.00

FILED
14 DEC -1 PM 3:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers DEC 09 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RRMM 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:

Robert Cole

(Name of Person)

RRMM LLC

(Firm/Company)

2440 Laburnum Ave

(Address)

Charlotte, NC. 28205

(City/State and Zip Code)

For further information concerning this matter, please call:

Robert Cole

(Name of Person)

310

428-4702

at (

) (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:

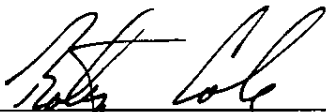
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

1. The name of a limited liability company is
RRMM, LLC
2. The Articles of Organization were filed on JULY 10TH, 2012 and assigned
document number L12000089360
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)
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).
No longer in 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: Robert Cole
2440 Laburnum Ave.
Charlotte, N.C 28205

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

Robert Cole

Printed Name

FILING FEE: \$25.00

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