# L12000125U88

(Re	equestor's Name)			
(Ad	ldress)	· · · · · · · · · · · · · · · · · · ·		
(Ad	ldress)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate:	s of Status		
Special Instructions to Filing Officer:				
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# **COVER LETTER**

TO: Registration Section
Division of Corporations

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SUBJECT: Vigilant Enterprises 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:

Rolando J. Santiago Esq. (Name of Person)
TJ5 Law Gruy?  (Firm/Company)
240 Apollo Beach Blud.
(Address)  Apollo Beach, FL 33572  (City/State and Zip Code)  (City/State and Zip Code)
For further information concerning this matter, please call:
Roland J. Sactions at (813) 641 CO100 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee and Certificate of Dissolution

### **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

Certified Copy (additional copy is enclosed)

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is
	Vigilant Enterprises LLC
2.	The Articles of Organization were filed on 10000 and assigned
	document number <u>L12000125688</u>
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).
	(1) Company has gone out of business and sold all assets;
	a) Consent of all members. Es =
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. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:
(	Illan Davis Allan L. Davis
(	Signature Allan L. Davis  Printed Name  FILING FEE: \$25.00

# Notice of Limited Liability Company Dissolution

#### NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Document number of Limited Liability Company is:	Name of Limited Liability Company: Wigilant Enterprises L	LC_	
Date of dissolution was: 1   5   2016  Description of information that must be included in a written claim:  (i) Name and address of the claimant.  (ii) Name and address of the claimant.  (iii) A summay statement of the claimant.  (iii) A s	Document number of Limited Liability Company is: <u>L12008125688</u>	3	
Description of information that must be included in a written claim:  (i) Name and address of the claimant.  (ii) Name and address of the claimant.  (iii) A summay statement of the claim.  (iii) Unlited documentary adverse that supports the claim.  (iii) Unlited documentary adverse that supports the claim.  (iii) Unlited documentary adverse that supports the claim.  (iii) A summay statement of the Claimantary adverse that supports the claim.  (iii) A summay statement of the Claimantary adverse that supports the claim sent to the Division of Corporations.  (iii) A summay statement of the Claimantary adverse that supports the claims cannot be sent to the Division of Corporations.  (iii) A summay statement of the Claimantary adverse that supports the Claimantary adverse that supports the Claimantary adverse that summay			
(2) A summay statement of the claim.  (3) Written documentary a where that supports the claim.  (4) Value of alleged claim  Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  Allen Davis  (6736 Knights bridge Dive  New Part Richey FL 34653  A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.  Alland Davis  Alland Davis  Alland Davis  Alland Davis	·		
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  Allan Davis  Corso Krights bridge Trive  New Part Richey FL 34653  A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.  Allan Davis  Allan Davis  Allan Davis  Allan Davis  Allan Davis	1) Name and address of the claimant.	·• • ·	
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	Printed Name of the Person Filing  Printed Name of the Person Filing  Signature of the Person Filing	X Wan	B

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00