

L12000137990

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

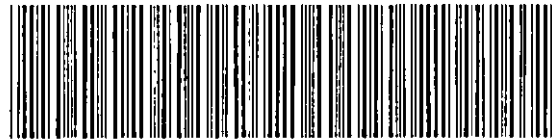
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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RECEIVED

2020 SEP 15 PM 2:12

OFFICE OF THE
CLERK OF THE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2020 SEP 15 PM 1:19

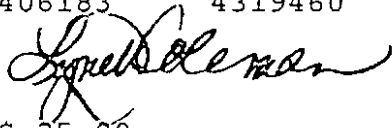
C. GOLDEN

SEP 16 2020

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 406183 4319460

AUTHORIZATION : 

COST LIMIT : \$ 25.00

ORDER DATE : August 31, 2020

ORDER TIME : 10:42 AM

ORDER NO. : 406183-035

CUSTOMER NO: 4319460

DOMESTIC FILINGS

NAME: AP CURTISS, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson - EXT#

EXAMINER'S INITIALS: _____

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

28

2012 15 PM 1:19

1. The name of a limited liability company is
AP CURTISS, LLC
2. The Articles of Organization were filed on 10/25/2012 and assigned
document number L12000137990
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).
Consent of Members

Consent of Members

Consent of Members

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: _____
Mark Salzberg
1155 N. Gulfstream Avenue, #1902,
Sarasota, FL 34236

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

Mark Salzberg, Member

Printed Name

FILING FEE: \$25.00

12857140