

L13 000006494

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

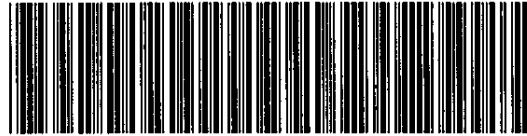
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/14/14--01024--003 **25.00

FILED
2014 APR 14 PM 1:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 16 2014

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BIG R MULTI SERVICES, 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:

MARIE B NICOLAS

(Name of Person)

BIG-R MULTI SERVICES, LLC

(Firm/Company)

6121 BURHLEY CT

(Address)

ORLANDO, FL 32809

(City/State and Zip Code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 APR 14 PM 1:12

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For further information concerning this matter, please call:

MARIE B NICOLAS

(Name of Person)

407

721-9897

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

BIG-MULTI SERVICES, LLC

2. The Articles of Organization were filed on 1/14/2013 and assigned

document number L13000006494

3. The delayed effective date the dissolution if not effective on the date of filing: 04/30/2014
(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).

PARTNER UNABLE TO CONDUCT THE BUSINESS BY HERSELF.

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

6121 BURHLEY CT

ORLANDO, FLORIDA 32809

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:

Marie B Nicolas
Signature

4/9/14
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.

Name of Limited Liability Company: BIG-R MULTI SERVICES, LLC

Document number of Limited Liability Company is: L1300006494

Date of dissolution was: 04/30/2014

Description of information that must be included in a written claim:

2014 APR 14 PM 1:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

6121 BURHLEY CT

ORLANDO, FLORIDA 32809

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.

Marie B. Quilas
Printed Name of the Person Filing

4/9/14
Signature of the Person Filing

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