

L13000028522

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

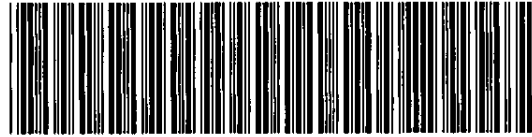
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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03/24/14--01007--012 \*\*75.00

RECEIVED  
TO ADMINISTRATIVE  
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2014 MAR 24 AM 10:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2014 MAR 25 AM 10:00

FILED

MAR 26 2013

T. HAMPTON

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

David Anthony insurance of Cape Coral

LLC

Signature \_\_\_\_\_

Requested by: SN

3/24/14

Name \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

\_\_\_\_ Art of Inc. File \_\_\_\_\_  
\_\_\_\_ LTD Partnership File \_\_\_\_\_  
\_\_\_\_ Foreign Corp. File \_\_\_\_\_  
\_\_\_\_ L.C. File \_\_\_\_\_  
\_\_\_\_ Fictitious Name File \_\_\_\_\_  
\_\_\_\_ Trade/Service Mark \_\_\_\_\_  
\_\_\_\_ Merger File \_\_\_\_\_  
\_\_\_\_ Art. of Amend. File \_\_\_\_\_  
\_\_\_\_ RA Resignation \_\_\_\_\_  
\_\_\_\_ ☒ Dissolution / Withdrawal \_\_\_\_\_  
\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_  
\_\_\_\_ Cert. Copy \_\_\_\_\_  
\_\_\_\_ Photo Copy \_\_\_\_\_  
\_\_\_\_ Certificate of Good Standing \_\_\_\_\_  
\_\_\_\_ Certificate of Status \_\_\_\_\_  
\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_  
\_\_\_\_ Corp Record Search \_\_\_\_\_  
\_\_\_\_ Officer Search \_\_\_\_\_  
\_\_\_\_ Fictitious Search \_\_\_\_\_  
\_\_\_\_ Fictitious Owner Search \_\_\_\_\_  
\_\_\_\_ Vehicle Search \_\_\_\_\_  
\_\_\_\_ Driving Record \_\_\_\_\_  
\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_  
\_\_\_\_ UCC 11 Search \_\_\_\_\_  
\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_  
\_\_\_\_ Courier \_\_\_\_\_

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** David Anthony Insurance of Cape Coral, 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:

Frank J. Aloia, Jr., Esq.

\_\_\_\_\_  
(Name of Person)

Aloia, Roland & Lubell, LLP

\_\_\_\_\_  
(Firm/Company)

2254 1st Street

\_\_\_\_\_  
(Address)

Fort Myers, FL 33901

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Frank J. Aloia, Jr., Esq.

\_\_\_\_\_  
(Name of Person)

at ( 239 ) 791-7950

\_\_\_\_\_  
(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 25, 2014

CAPITAL CONNECTION INC  
SN

SUBJECT: DAVID ANTHONY INSURANCE OF CAPE CORAL, LLC  
Ref. Number: L13000028522

RECEIVED  
2014 MAR 25 PM 4:23  
TO ADOPTOR USE  
SUFFICIENCY OF FILING

We have received your document for DAVID ANTHONY INSURANCE OF CAPE CORAL, LLC and your check(s) totaling \$75.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton  
Regulatory Specialist III

Letter Number: 014A00006326

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

1. The name of a limited liability company is  
David Anthony Insurance of Cape Coral, LLC
2. The Articles of Organization were filed on 2-22-2013 and assigned  
document number L13000028522
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).  
The Member has decided to cease the operation and business of the LLC.
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: David A. Iannone  
12331 Town Lake Drive, #2  
Fort Myers, FL 33913
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

David A. Iannone  
Printed Name

**FILING FEE: \$25.00**

2014 MAR 25 AM 10:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

## 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: David Anthony Insurance of Cape Coral, LLC

Document number of Limited Liability Company is: L13000028522

Date of dissolution was: 03-25-2014

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

The Member has decided to cease the operation and business of the LLC.

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

David A. Iannone

12331 Town Lake Drive, #2

Fort Myers, FL 33913

FILED  
2014 MAR 25 AM 10:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

Frank J. Aloia, Jr., Esq.

Printed Name of the Person Filing



Signature of the Person Filing

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