

L13060036950

(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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DIVISION OF CORPORATIONS
2014 MAY -2 AM 9:38
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T. HAMPTON
MAY -2 2013

14 MAY -2 AM 9:51
STATE OF FLORIDA
TALLAHASSEE

APPROVED
AND
FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tony & Dale's Seafood & Diner
(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:

Barbara A. McFarland
(Name of Person)

~~125 Ray Rd~~ Tony & Dale's Seafood & Diner
(Firm/Company)

2190-4 W. Tennessee St
(Address)

Tallahassee 32304
(City/State and Zip Code)

For further information concerning this matter, please call:

Barbara A. McFarland
850-556-8952 Ray at (850) 556-8952
(Name of Person) (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

Tony + Dale's School + More, LLC

2. The Articles of Organization were filed on 3-12-13 and assigned
document number L13 0000 34950

3. The delayed effective date the dissolution if not effective on the date of 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).

how sale's figure

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

Barbara A. McFarland
125 Ray Rd
Quincy, FL 32351

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

Barbara^A McFarland

Printed Name

Barbara^A McFarland

FILING FEE: \$25.00

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AND
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14 MAY -2 AM 9:51
STATE
OFFICE OF
FLORIDA