

L13000040985

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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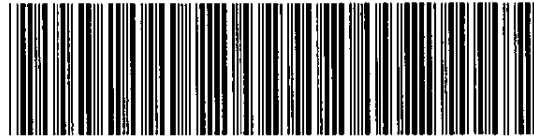
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 FEB 12 PM 2:17

APPROVED
AND
FILED

G. HARVEY
FEB 12
EXAMINER

COVER LETTER

TO: * Registration Section
Division of Corporations

SUBJECT: Connection Ministries of South Florida, 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:

Mark W. Conn
(Name of Person)

Connection Ministries of S.F.L.
(Firm/Company)

17071 NW 23rd Street
(Address)

Pembroke Pines, FL 33028
(City/State and Zip Code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Mark Conn at (305) 333-0391
(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

Connection Ministries of South Florida LLC

2. The Articles of Organization were filed on 4-30-13 and assigned

document number L13000040985

3. The delayed effective date the dissolution if not effective on the date of filing: 1-31-15
(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).

Re-forming as a non-profit corporation

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 W. Conn
17071 NW 23rd Street
Pembroke Pines, FL 33028

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 W. Conn
Printed Name

FILING FEE: \$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
FILED