

L13000043139

(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:

Wrong form

Office Use Only



900280743019

02/05/16--01011--009 **25.00

FILED
2016 MAR 14 PM 1:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

MAR 15 -



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
2016 MAR 14 PM 2:37
TALLAHASSEE, FLORIDA

February 10, 2016

JEFF WIRS
RE: JW CUSTOM, LLC
1528 NW 111 AVE.
CORAL SPRINGS, FL 33071

SUBJECT: JW CUSTOM, LLC
Ref. Number: L13000043139

We have received your document for JW CUSTOM, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Karen A Saly
Regulatory Specialist II

Letter Number: 216A00002875

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JW CUSTOM
(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:

JEFF WIRS

(Name of Person)

JW CUSTOM

(Firm/Company)

1528 NW 111 AVE.

(Address)

CORAL SPRINGS, FL 33071

(City/State and Zip Code)

For further information concerning this matter, please call:

JEFF WIRS

(Name of Person)

at (954) 603-6101

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee and Certificate of Dissolution
(ALREADY ON FILE)

☐ \$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

FILED
2016 MAR 14 PM 1:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

JW Custom

2. The Articles of Organization were filed on 3/21/2013 and assigned

document number L 13000043139

3. The delayed effective date the dissolution if not effective on the date of filing: 12/31/2015
(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).

NO LONGER CONDUCTING BUSINESS.

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

JEFF WIRS

1528 NW 111 AVE.

CORAL SPRINGS, FL 33071

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:

Jeff Wirs
Signature

JEFF WIRS
Printed Name

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

FILED
2016 MAR 14 PM 1:26
CLERK OF STATE
TALLAHASSEE, FLORIDA

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: JW CUSTOM

Document number of Limited Liability Company is: L 13000043139

Date of dissolution was: 12/31/2015

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

NAME OF CLAIMANT, DATE OF SERVICE OR SALE, INVOICE(S)
DETAILING SERVICE(S) OR PRODUCT(S) OF CLAIM, CONTACT
INFORMATION, SPECIFICS OF CLAIM(S).

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

JEFF WIRS
1528 NW 111 AVE.
CORAL SPRINGS, FL 33071

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.

JEFF WIRS

Printed Name of the Person Filing

Jeff Wirs

Signature of the Person Filing