# L13000045367

| (Re                                     | questor's Name)   | <del></del>     |
|---|-------------------|-----------------|
| (Ad                                     | dress)            |                 |
| (Ad                                     | dress)            |                 |
| (Cit                                    | y/State/Zip/Phone | <del>; #)</del> |
| PICK-UP                                 | ☐ WAIT            | MAIL            |
| (Bu                                     | siness Entity Nan | ne)             |
| (Document Number)                       |                   |                 |
| Certified Copies                        | _ Certificates    | of Status       |
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December 3, 2018

NICHOLAS T CALICCHIO 2242 HEMINGWAY DR, STE. B FORT MYERS, FL 33912-1981

SUBJECT: NICHOLAS T. CALICCHIO LLC

Ref. Number: L13000045367

We have received your document for NICHOLAS T. CALICCHIO LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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.

Letter Number: 618A00024724

Karen A Saly Regulatory Specialist II

www.sunbiz.org

# **COVER LETTER**

| TO: Registration Section Division of Corporations   |
|---|
| SUBJECT: 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:   |
| NICHOLAS T. CALICCHIO  (Name of Person)  NICHOLAS T. CALICCHIO LLC  (Firm/Company)  |
| 2242 HEMINGWAY DR. STE. B   |
| FOR 7 MYPRS FL. 33912 - 1981 (City/State and Zip Code)  |
| For further information concerning this matter, please call:  |
| NICHOLAS T. CALICCIHIO at (239) 989 8781 (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) |
| NATIONS ADDRESS. STREET/COURIED ADDRESS.  |

### 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

|  | · · ·  |   |
|--|--|---|
|  | ARTICLES OF DISSOLUTION  | 18 DEC 17 PH 4: 1   |
|  | FOR<br>A LIMITED LIABILITY COMPANY   | 18 DFC (1)  |
|  |  | DE TO PH 4.   |
| The name of a limited liabil                               | •  | All the   |
| NILHOLAS   | T. CALICCHIO   | PH 4: 1   |
| The Articles of Organization                               | n were filed on MARCH 26, 2013 and   | assigned  |
| document number  | <u>3000045367</u>  | Decemes at 34,2017  |
| The delayed effective date t                               | he dissolution if not effective on the date of filing:   | TANUARY 1, 2018   |
|  | he dissolution if not effective on the date of filing: date cannot be prior to or more than 90 days later than date docume his block does not meet the applicable statutory filing require tive date on the Department of State's records.   | ent is received for filing)<br>ments, this date will not be |
| $605.0707$ , Florida Statutes, ( $\cancel{B\cdot V5/NE3S}$ | that resulted in the limited liability company's dissoluted to the limited liability company's dissoluted to the limited liability company's dissoluted by limited liability liabi | Ľ   |
| If there are no members, en activities and affairs:        | ter the name and address of the person appointed to wir  NICHOLAS T. CALICCHIO   |   |
|  |  |   |
| Signature of an authorized ted above to wind up the co     | person or if there are no members, the signature of the properties and affairs:  | person appointed and  |
|  | • •  |   |
| licholos / Callo<br>Signature                              | velier NICHOLAS T  | CALICCITIO  |

**FILING FEE: \$25.00**