

L13000085747

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

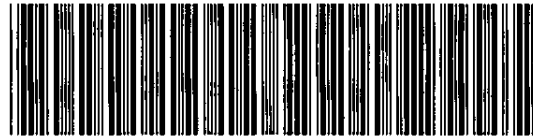
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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14 OCT -9 PM 1:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 10 2014
T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AMY BRANNON 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:

AMY BRANNON
(Name of Person)

AMY BRANNON
(Firm/Company)

9600 DOMINICAN DR
(Address)

MIAMI, FL 33189
(City/State and Zip Code)

For further information concerning this matter, please call:

AMY BRANNON at (305) 298-7333
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 1, 2014

AMY BRANNON
9600 DOMINICAN DR
MIAMI, FL 33189

SUBJECT: AMY BRANNON LLC
Ref. Number: L13000085747

Upon receipt of your letter and/or check(s) totaling \$25.00, no document was found. Please send your document with any fees due to:

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

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.

Tammy Hampton
Regulatory Specialist III

Letter Number: 514A00020987

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

1. The name of a limited liability company is

AMY BRANNON LLC

2. The Articles of Organization were filed on 11/16/14 and assigned

document number L13000085747

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).

NO LONGER EMPLOYED
BY QUEST I WAS
DISCRIMINATED AGAINST
AND PHYSICALLY TREATENED

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

AMY BRANNON
9600 DOMINICAN DR
CUTLER BAY, FL 33189

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

A BRANNON
Printed Name

FILING FEE: \$25.00

FILED
14 OCT -9 PM 1:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA