

LE3000104458

(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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FILED  
2014 APR 21 PM 4:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** IDEAL TITLE, 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:

Rob Feldman

(Name of Person)

(Firm/Company)

257 Sedona Way

(Address)

Palm Beach Gardens, FL 33418

(City/State and Zip Code)

For further information concerning this matter, please call:

Rob Feldman

(Name of Person)

301

at (

442-5976

(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**

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is  
IDEAL TITLE, LLC

2. The Articles of Organization were filed on 07/24/2013 and assigned  
document number L13000104458

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).

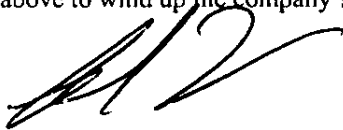
Business is closed

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

257 Sedona Way

Palm Beach Gardens, FL 33418

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

Rob Feldman

Printed Name

**FILING FEE: \$25.00**