

L13000142861

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
NOV 14 2016

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **ProcurePal, 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:

Daryl Paul Hudson

(Name of Person)

ProcurePal, LLC

(Firm/Company)

401 E Las Olas Blvd Suite 1400

(Address)

Fort Lauderdale FL 33301

(City/State and Zip Code)

For further information concerning this matter, please call:

Daryl Hudson

(Name of Person)

at (**954**) **557-1992**

(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

STATE OF FLORIDA
TALLAHASSEE

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

1. The name of a limited liability company is

ProcurePal, LLC

2. The Articles of Organization were filed on 10/09/2013 and assigned

document number L13000142861

3. The delayed effective date the dissolution if not effective on the date of filing: 10/01/2016 
(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).

Company unable to cover operating expenses due to bad debt from customers not paying firm for products supplied

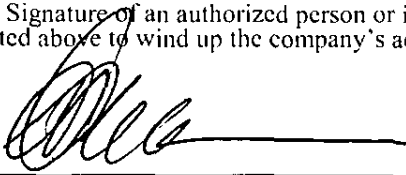
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Daryl Paul Hudson

2009 Admirals Way

Fort Lauderdale FL 33316

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

Daryl Paul Hudson

Printed Name

FILING FEE: \$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

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