

L13000 158 600

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

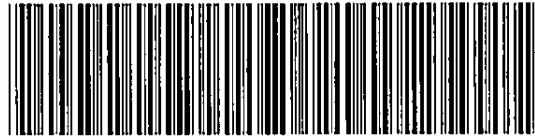
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FL

AB

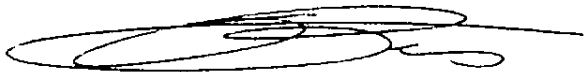
Florida Department of State
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

December 20, 2024

This letter serves as acknowledgement for certificate of Dissolution for document number L13000158600, filed on November 12, 2013.

Contact information: Scot F Davis 904-239-7870
269 Wexford Ct.
Altamonte Springs, FL 32714

Sincerely,

A handwritten signature in black ink, appearing to read "Scot F Davis", with a horizontal line extending to the right.

Scot F Davis

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DAVIS AUTOMOTIVE Consulting 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:

SCOT DAVIS

(Name of Person)

(Firm/Company)

269 WEXFORD COURT

(Address)

Altamonte Springs FL 32714

(City/State and Zip Code)

For further information concerning this matter, please call:

SCOT DAVIS

(Name of Person)

at 904 239-7870

(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

1. The name of a limited liability company is

DAVIS Automotive Consulting LLC

2024 DEC 30 PM 1:47

2. The Articles of Organization were filed on

11/12/2013

SECRETARY OF STATE
and Treasurer
TALLAHASSEE, FL

document number

L13000158600

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)

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).

LLC IS NOT GENERATING enough profit to
be sustainable. Not interested in selling.

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

SCOTT DAVIS

269 Wexford Court

Altamonte Springs FL 3274

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

Scott F. Davis
Printed Name

FILING FEE: \$25.00

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Printed Name

FILING FEE: \$25.00