

LI3000168519

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

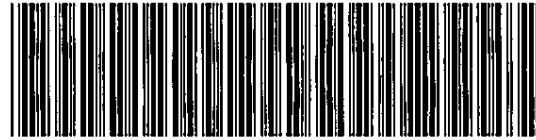
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/04/14--01012--006 **25.00

2014 APR -4 PM12:12
CLERK OF STATE
TALLAHASSEE FLORIDA

FILED

APR 07 2014

D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 2624 ATLANTIC 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:

RENE U PULIDO

(Name of Person)

(Firm/Company)

2624 ATLANTIC BLVD

(Address)

JACKSONVILLE, FL 32207

(City/State and Zip Code)

For further information concerning this matter, please call:

RENE U PULIDO

(Name of Person)

at

904

629-3484

(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

FILED
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TALLAHASSEE
FLORIDA
SECRETARY OF STATE

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

1. The name of a limited liability company is

2624 ATLANTIC LLC

2. The Articles of Organization were filed on 12/05/2013 and assigned
document number L13000168519

3. The delayed effective date the dissolution if not effective on the date of 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).

NEVER CONDUCTED ANY BUSINESS. THIS LLC WAS OPENED BY MISTAKE,
BECAUSE WE ALREADY HAVE THE CORRECT LLC ACTIVE, THAT WAS FILED ON 05/30/2013,
WITH THE SAME NAME(SEPARATED BY COMMA BEFORE THE BUSINESS ENTITY LLC).

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

RENE U PULIDO

2624 ATLANTIC BLVD

JACKSONVILLE, FL 32207

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

Printed Name

RENE U PULIDO

FILING FEE: \$25.00

FILED
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CLERK OF STATE
TALLAHASSEE FLORIDA