

L14000000361

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

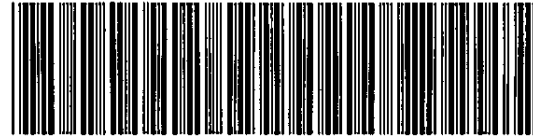
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/23/14--01003--008 **25.00

FILED
2014 SEP 23 PM 4:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
SEP 29 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jax Marketing & Investing, 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:

Tamara Bond
(Name of Person)

Jax Marketing & Investing, LLC
(Firm/Company)

450 State Rd 13N #141
(Address)

Saint Johns, FL 32259
(City/State and Zip Code)

For further information concerning this matter, please call:

Tamara Bond at (904) 342-8194
(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

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

FILED

2014 SEP 23 PM 4:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Jax Marketing & Investing LLC

2. The Articles of Organization were filed on 1/2/14 and assigned

document number L14 000000361

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 venture fell through no longer interested
in moving forward

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

Tamara Bond

450 State Rd 13N #141

St. Johns, FL 32259

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:

TmBond
Signature

Tamara Bond
Printed Name

FILING FEE: \$25.00