

L1400004/0343

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

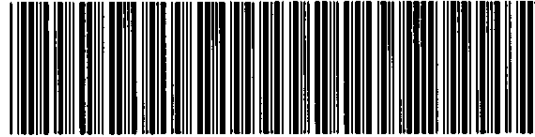
(Business Entity Name)

(Document Number)

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16 OCT -6 AM 9:58  
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TALLAHASSEE, FLORIDA

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16 OCT -6 PM 12:01

D. SCOTT  
OCT 10 2016



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 7, 2016

*CORRECTION*

SUBJECT: DWSS ST. PETE, L.L.C.  
Ref. Number: L14000010343

We have received your document for DWSS ST. PETE, L.L.C. and your check(s) totaling \$175.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Notice of Dissolution must contain a description of information that should be included in a written claim.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 716A00021625

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**SUNSHINE** CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive  
Tallahassee, Florida 32312

(850) 656-4724

SUNSHINECORPORATE2014@GMAIL.COM

Date: 10-6-16

ENTITY NAME:

DWSS St. Pete, LLC

**\*\*PLEASE FILE THE ATTACHED AND RETURN:\*\***

X

Plain Copy

Certified Copy

**\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY:\*\***

Document Number: \_\_\_\_\_

\_\_\_\_\_  
Certified Copy of Arts & Amendments

\_\_\_\_\_  
Certificate of Good Standing

**\*\*APOSTILLE/NOTARIAL CERTIFICATION:\*\***

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL AMOUNT OWED: 25

CHECK NUMBER: 2934

PLEASE CONTACT TINA AT 850-508-1891 FOR ANY PROBLEMS OR INFORMATION ON THIS MATTER.

Thank you!

Tina Goff, President

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16 OCT -6 AM 9:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DWSS ST. PETE, 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:

Lee A. Popkin, Esq.

(Name of Person)

Long, Ragsdale & Waters, P.C.

(Firm/Company)

1111 Northshore Drive, Suite S-700

(Address)

Knoxville, Tennessee 37919

(City/State and Zip Code)

For further information concerning this matter, please call:

Lee A. Popkin, Esq.

(Name of Person)

865

584-4040

at ( )

(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

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TALLAHASSEE, FL  
SECRETARY OF STATE

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

1. The name of a limited liability company is  
DWSS St. Pete, LLC


2. The Articles of Organization were filed on January 17, 2014 and assigned  
document number L14000040343

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).  
The consent of all the members

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

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

Richard Willingham

Printed Name

**FILING FEE: \$25.00**

FILED  
16 OCT -6 AM 9:58  
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TALLAHASSEE, FLORIDA