

L14000017396

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(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

2017 APR 27 P 1:17

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D. BRUCE
MAY 01 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 11, 2017

TOM DEVORE
3615 KAISER AVE
ST CLOUD, FL 34772

SUBJECT: TD FABRICATIONS, LLC
Ref. Number: L14000017396

RECEIVED
2017 APR 26 PM 4:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for TD FABRICATIONS, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check or money order** made payable to the Department of State for \$25.00.

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

Deborah Bruce
Regulatory Specialist II

Letter Number: 417A00007014

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TD FABRICATIONS 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:

TOM DEVORE
(Name of Person)
TD FABRICATIONS LLC
(Firm/Company)
3615 KAISER AVE
(Address)
ST CLOUD FL 34772
(City/State and Zip Code)

For further information concerning this matter, please call:

TOM DEVORE at (321) 271-2200
(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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 APR 29 PM 1:17

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

1. The name of a limited liability company is

TD FABRICATIONS LLC

2. The Articles of Organization were filed on 1-28-14 and assigned

document number L14000017396

3. The delayed effective date the dissolution if not effective on the date of filing: 4-5-17
(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.

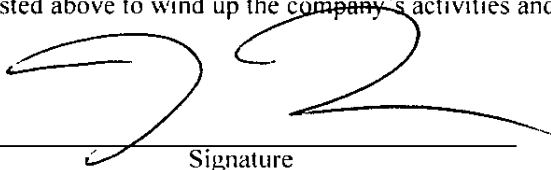
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes. (copy 605.0707 on back cover letter).

OWNER HAS FALLEN INTO BAD HEALTH

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

TOM DEVORS
3615 KAISER AVE
ST CLOUD FL 34772

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

TOM DEVORS

Printed Name

FILING FEE: \$25.00

2017 APR 27 PM 1:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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