

L14000030764

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status ☒

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11/16/20

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VID

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MAINSAIL CAPITAL MORTGAGE 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:

JB ROTH, ESQ.

(Name of Person)

ROTH LAW FIRM PL

(Firm/Company)

450 STATE ROAD 13 NORTH, SUITE 106-134

(Address)

ST JOHNS, FL 32259

(City/State and Zip Code)

For further information concerning this matter, please call:

JB ROTH

(Name of Person)

904

595-7900

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 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**

1. The name of a limited liability company is
MAINSAIL CAPITAL MORTGAGE LLC

2. The Articles of Organization were filed on 02/24/2014 and assigned
document number L14000030764

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.

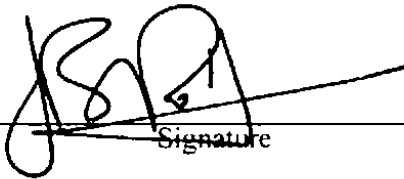
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

AN EVENT THAT THE OPERATING AGREEMENT STATES CAUSES DISSOLUTION, NAMELY,

A VOTE TO DISSOLVE BY TWO THIRD OF THE MEMBERSHIP INTEREST

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

JEAN B. ROTH

Printed Name

FILING FEE: \$25.00

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