

L14 000040535

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

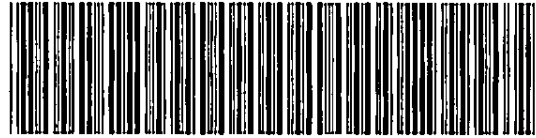
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Special Instructions to Filing Officer:

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APR 20 2022

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04/11/22--01044--001 \*\*25.00

FILED

2022 APR 11 PM 3:25

SECRETARY OF STATE  
TALLAHASSEE, FL

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 3LDR Media Labs, 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:

Shane Wooten

(Name of Person)

3LDR Media Labs, LLC

(Firm/Company)

39 SE 62nd Terrace

(Address)

Ocala, FL 34472

(City/State and Zip Code)

For further information concerning this matter, please call:

Shane Wooten

(Name of Person)

at ( 615 ) 669-0267  
(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

**Notice of Limited Liability Company Dissolution**

**FILED**

2022 APR 11 PM 3: 25

**NOTE: This page is optional**

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

SECRETARY OF STATE  
TALLAHASSEE, FL

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: 3LDR Media Labs, LLC

Document number of Limited Liability Company is: L14000040535

Date of dissolution was: ~~03/30/2022~~ 3/29/22

Description of information that must be included in a written claim:

Vendor Name, Account Number, Amount on owed on the account, Copy of the outstanding invoices,

accompanied by a signature of acceptance from a member or manager.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

3LDR Media Labs, LLC c/o Shane Wooten

39 SE 62nd Terrace

Ocala, FL 34472

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Shane Wooten

Printed Name of the Person Filing

  
Signature of the Person Filing

**Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00**