

L14000056590

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

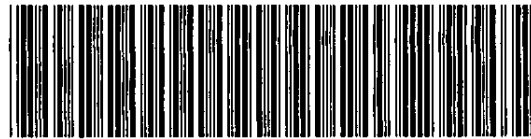
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900296251509

03/13/17--01039--006 **25.00

FILED

17 MAR 13 AM 9:00

O SIMMONS
MAR 14 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Staff Dojo 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:

Walter Bechtel
(Name of Person)

Staff Dojo LLC
(Firm/Company)

21391 Town Lakes Dr #113
(Address)

Boca Raton FL 33486
(City/State and Zip Code)

For further information concerning this matter, please call:

Walter Bechtel at (305) 846 1179
(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**

1. The name of a limited liability company is

Staff Dojo LLC

2. The Articles of Organization were filed on April 7, 2014 and assigned

document number L14000056590

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).

Affordable Care Act concerns

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

Walter Bechtel
21391 Town Lakes Dr # 113
Boca Raton FL 33486

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

Walter Bechtel
Printed Name

FILING FEE: \$25.00

17 MAR 13 AM 9:00

FILED