

K14000110405

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

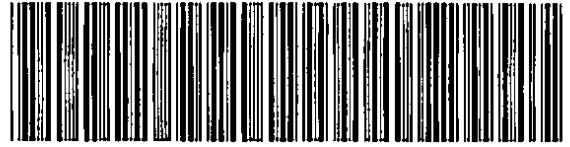
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/10/21--01010--022 **25.00

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2021 DEC 10 PM 3:43
SECRETARY OF STATE
MASSACHUSETTS

Dissolution

DEC 22 2021

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Rv Rentals of Jacksonville 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:

Kimberly Dube
(Name of Person)
Rv Rentals of Jacksonville
(Firm/Company)
2020 Rivergate Dr.
(Address)
Fleming Isl. FL 32003
(City/State and Zip Code)

For further information concerning this matter, please call:

→ Jeff Dube — at (904) 465-0897
(Name of Person) (Area Code & Daytime Telephone Number)
→ Kimberly Dube — 904-708-7631

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

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

1. The name of a limited liability company is

RV Rentals of Jacksonville

2. The Articles of Organization were filed on 7-14-2014 and assigned

document number L14000110405

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.

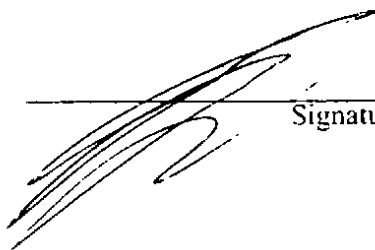
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

Doing so little business, the cost of running
the company is not supported.

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

Jeff Duke or Kimberly Duke
2020 Rivergate Dr. ← same address
Fleming Isl. FL 32003

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

Jeff Duke
Printed Name

FILING FEE: \$25.00