

L14000111845

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

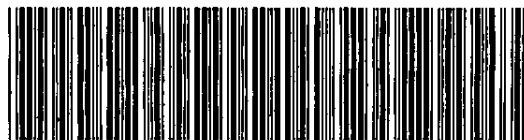
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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18 MAR 23 PM 1:21
STATE
OFFICE OF
RECORDS & ADMINISTRATION
TALLAHASSEE, FLORIDA

J. LEGGETT
MAR 26 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Direct Movement Group, 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:

Jason Horrocks

(Name of Person)

Direct Movement Group, LLC

(Firm/Company)

6060 Chester Circle

(Address)

Jacksonville FL 32217

(City/State and Zip Code)

For further information concerning this matter, please call:

Jason Horrocks

(Name of Person)

at 904 2845337

(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
Direct Movement Group, LLC

2. The Articles of Organization were filed on 07/15/2014 and assigned
document number L14000111845

3. The delayed effective date the dissolution if not effective on the date of filing: June 1 2018
(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).
Company ran dry with cash flow issues from clients not paying for work on services rendered to the tune

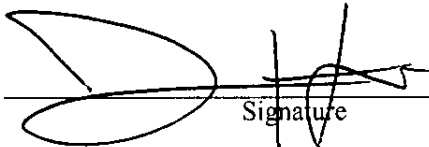
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Jason Horrocks

125 Scotland Yard

St. Johns FL 32259

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STATE
OF FLORIDA

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

Jason Horrocks

Printed Name

FILING FEE: \$25.00