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(Red	questor's Name)	
	dress)	
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(Cit	y/State/Zip/Phone	ə #)
PICK-UP		MAIL
(Bu:	siness Entity Nan	ne)
(Do	cument Number)	<u> </u>
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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Office Use Only



April 22, 2015

donald halil jr 1543 alexandria pl n jacksonville, FL 32207

SUBJECT: HOLD IT LLC Ref. Number: L14000150263

Upon receipt of your letter and/or check(s) totaling \$25.00, no document was found. Please send your document with any fees due to:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers Regulatory Specialist II Registration/Qualification Section

Letter Number: 815A00008115

r S COVER LETTER
TO: Registration Section Division of Corporations
SUBJECT: Hold it 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:
Donald Halil Jr (Name of Person)
(Firm/Company)
1543 Alexandria ?1. N (Address)
Jacksonville, F1 32207 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (904), 545-6022 (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

	r A LIMITE	FOR D LIABILITY COMPA	NY	
1. The name of a lin	mited liability company is	uc		
2. The Articles of (Organization were filed or	9/25/2014	and assigned	
document numbe	- L14000150	292		
Note: If the date	(effective date cannot be pr inserted in this block does r		than date document is received fo ry filing requirements, this date	
A		n the limited liability comp 7 on back cover letter). Sharb the	bany's dissolution pursuant	to section
	A NUL CO	31000	005(11(3)	
5. If there are no m activities and aff		nd address of the person ap	pointed to wind up the com	ipany's
		nd address of the person ap	pointed to wind up the com	Ipany's
		nd address of the person ap	pointed to wind up the com	npany's SECRETAN
		nd address of the person ap	pointed to wind up the com	pany's SECRETARY OF ALL-ANASSEE
activities and aff	àirs:	re are no members, the sig	pointed to wind up the com	15 JUL -6 AMI

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FILING FEE: \$25.00