

L14 000 154 145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

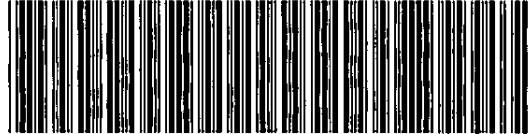
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100271294761

04/06/15--01037--023 **25.00

RECEIVED

15 JUN 25 PM 3:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

15 JUN 25 AM 10:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 29 2015
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BIG T DISTRIBUTING, L.L.C.
(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.

THOMAS ROBERTS

(Name of Person)

BIG T DISTRIBUTING, LLC

(Firm/Company)

P.O. Box 94

(Address)

SHARPES, FL 32959

(City/State and Zip Code)

For further information concerning this matter, please call.

THOMAS ROBERTS

(Name of Person)

at (321) 626-5970

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 15, 2015

THOMAS ROBERTS
P.O. BOX 94
SHARPES, FL 32959

SUBJECT: BIG T DISTRIBUTING, LLC
Ref. Number: L14000154145

We have received your document for BIG T DISTRIBUTING, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

Please return 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.

Jenna D Harris
Regulatory Specialist II

Letter Number: 815A00010296

FILED
15 JUN 25 AM 10:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 21, 2015

BIG T DISTRIBUTING, LLC
PO BOX 94
SHARPES, FL 32959

SUBJECT: BIG T DISTRIBUTING, LLC
Ref. Number: L14000154145

We have received your document for BIG T DISTRIBUTING, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return 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.

Jenna D Harris
Regulatory Specialist II

Letter Number: 115A00008014

FILED
15 JUN 25 AM 10:18
DIVISION OF STATE
TALLAHASSEE, FLORIDA

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

1. The name of a limited liability company is

Big T Distributing, LLC

2. The Articles of Organization were filed on 9/29/2014 and assigned

document number L14000154145

3. The delayed effective date the dissolution if not effective on the date of filing: 7/31/2015
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

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).

Financially unfeasible to continue operation. Operations ceased 12/31/2014.

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

Thomas Roberts

PO Box 94

Sharpes, FL 32959

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

Thomas Roberts

Printed Name

FILING FEE: \$25.00

FILED
15 JUN 25 AM 10:18
CLERK OF STATE
TALLAHASSEE, FLORIDA

** THIRD ATTEMPT*