

L14000 1760361

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

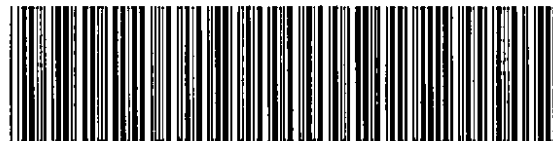
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2018 Dec 27 PM 5:55

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JAN 05 2019  
T. LERUEUX

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **SPEED TECH 123, 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:

**JOSE FRIMAN**  
\_\_\_\_\_

(Name of Person)

-  
\_\_\_\_\_

(Firm/Company)

**125 S. STATE ROAD 7 STE. 104-291**  
\_\_\_\_\_

(Address)

**WELLINGTON, FL 33414**  
\_\_\_\_\_

(City/State and Zip Code)

For further information concerning this matter, please call:

**JOSE FRIMAN**  
\_\_\_\_\_

(Name of Person)

at (\_\_\_\_\_) \_\_\_\_\_

(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  
SPEED TECH 123, LLC

2. The Articles of Organization were filed on \_\_\_\_\_ and assigned  
document number L14000176361

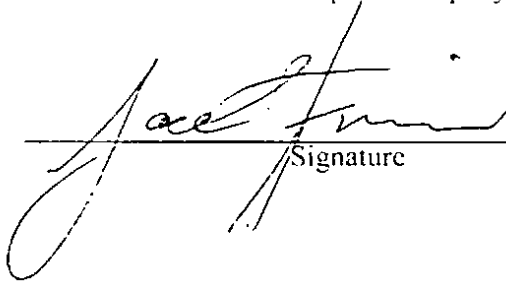
3. The delayed effective date the dissolution if not effective on the date of filing: \_\_\_\_\_  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, 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).

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

125 S. STATE ROAD 7 STE. 104-291, WELLINGTON, FL 33414

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

JOSE FRIMAN

Printed Name

**FILING FEE: \$25.00**

FILED  
2018 DEC 29 PM 12:56  
HALL COUNTY CLERK  
TALLAHASSEE, FLORIDA