

L14000 185 726

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

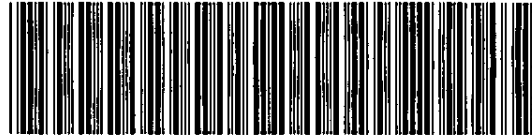
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN 12 2016  
J SHIVERS

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** JEG Sports  
(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:

Justin Glidewell  
(Name of Person)

JEG Sports  
(Firm/Company)

950 Seminole Sky Dr.  
(Address)

Ruskin FL 33570  
(City/State and Zip Code)

For further information concerning this matter, please call:

\_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
(Name of Person) (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

# Cover Letter

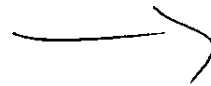
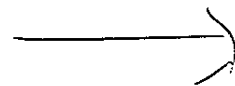
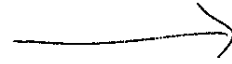
Justin Glidewell

950 Seminole Sky Dr.

Ruskin FL 33570

(407) 927-0430

JEG Sports LLC



Dissolution of LLC Formed on 12-4-2014

Document # L14000185726

Thank you,

Justin Glidewell

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

1. The name of a limited liability company is

JEG Sports

2. The Articles of Organization were filed on Dec. 4<sup>th</sup> 2014 and assigned

document number L14000185726

3. The delayed effective date the dissolution if not effective on the date of filing: Jan 3<sup>rd</sup> 2016  
(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).

I am requesting this dissolution because I am no longer  
willing and able to provide the services I started the business  
for. I am no longer seeing any new business, and all my  
previous clients have been served. I have no further obligations.

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

Justin Glidewell

950 Seminde Sky Dr.

Ruskin FL, 33570

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

Justin Glidewell  
Printed Name

**FILING FEE: \$25.00**

16 JAN 11 PM 1:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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