

L15000001645

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

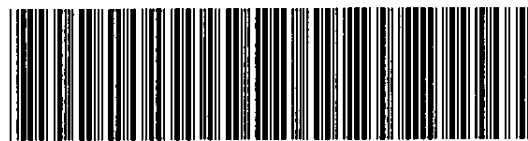
(Business Entity Name)

(Document Number)

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16 JAN 15 PM 3:01
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TALLAHASSEE, FLORIDA

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M. MILLIGAN
EXAMINER

JAN 15

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Danny Burgess Law, PLLC
(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:

Danny Burgess

(Name of Person)

Danny Burgess Law, PLLC

(Firm/Company)

P.O. Box 2650

(Address)

Zephyrhills, Florida 33539

(City/State and Zip Code)

For further information concerning this matter, please call:

Danny Burgess

(Name of Person)

at (813) 862-5042

(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**

16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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JAN 15 PM 3:01

1. The name of a limited liability company is

Danny Burgess Law, PLLC

2. The Articles of Organization were filed on January 5, 2015 and assigned

document number L15000001645

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).

Consent of all the members.

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

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

Daniel W. Burgess, Jr.

Printed Name

FILING FEE: \$25.00