LISOOE	
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
Office Use Only	

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Please give original submission dato as file date.

## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 18, 2018

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CSC

SUBJECT: CAVEMAN CONSTRUCTION LLC Ref. Number: L15000020743

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

You failed to make the correction(s) requested in our previous letter.

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707(1)(c), Florida Statutes, must be contained in the document.

Need the reason the company is dissolving.

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

Octavia L Simmons Regulatory Specialist III

Letter Number: 318A00007849

18 APR 24 PH 1: 37



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Please give original submission date as file date.

## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 17, 2018

CSC

SUBJECT: CAVEMAN CONSTRUCTION LLC Ref. Number: L15000020743

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

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707(1)(c), Florida Statutes, must be contained in the document.

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

Octavia L Simmons Regulatory Specialist III

Letter Number: 818A00007734

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Division of Componitions DO ROY 6997 Tallahassas Florida 29914

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> CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO.	:	12000000195
REFERENCE	:	163.621 7704613
AUTHORIZATION	:	A hear
COST LIMIT	:	\$ 25.00
ORDER DATE : April 16, 2018		

- ORDER DATE : Apr
- ORDER TIME : 2:19 PM
- ORDER NO. : 163621-005
- CUSTOMER NO: 7704613

### DOMESTIC FILINGS

NAME: CAVEMAN CONSTRUCTION LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY XX PLAIN STAMPED COPY \_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner - EXT#

EXAMINER'S INITIALS:

## **COVER LETTER**

TO: Registration Section Division of Corporations

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SUBJECT: Caveman Construction 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:

Morgan Mengini

(Name of Person)

Caveman Construction LLC

(Firm/Company)

721 CHARLESTOWN CIRCLE

(Address)

PALM BEACH GARDENS, FL 33410

(City/State and Zip Code)

For further information concerning this matter, please call:

Morgan Mengini (Name of Person) at (610) 304-6039 (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

 $\times \$25.00 Filing Fee and Certificate of Dissolution$ 

P.O. Box 6327

O \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations

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

	****		C				-
1	The	name	ot a	limited	liability	company	18
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	Cayeman Construction LLC	
2.	The Articles of Organization were filed on 2/3/2015	_and assigned
	document number_L15000020743	
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) <u>Note:</u> 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).

Dissolve the entity.		16
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		<u>्र</u> ्
If there are no members,	enter the name and address of the person appointed	to wind up the company's
		•
activities and affairs:	James Wagner	

Palm Beach Gardens, FL 33410

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:

4-12-18 James Wagner Signature Printed Name

**FILING FEE: \$25.00**