

L15 0000 46678

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

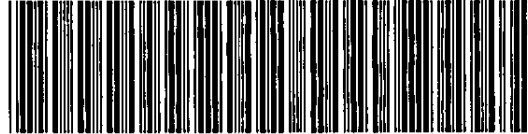
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/05/15--01006--029 **25.00

15 OCT -5 AM 7:16
FBI - LOS ANGELES
RECEIVED

OCT 06 2015
J SHIVERS



10401 Kingston Pike
Knoxville, TN 37922

2631A NW 41st St,
Gainesville, FL 32605

(865) 315-7351 phone
doctorslegal.com

October 1, 2015

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: EyeChek, LLC – Notice of Dissolution

Dear Sir or Ma'am:

Enclosed please find the Notice of Dissolution for EyeChek, LLC, along with a check for the \$25.00 filing fee and automatic Certificate of Dissolution.

If you should have any questions, please do not hesitate to contact me.

Sincerely yours,

A handwritten signature in black ink, appearing to read "Jesse D. Overbay". The signature is fluid and cursive.

Jesse D. Overbay

Enclosures



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EyeChek, 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:

Jesse D. Overbay

(Name of Person)

DoctorsLegal, PLLC

(Firm/Company)

10401 Kingston Pike

(Address)

Knoxville, TN 37922

(City/State and Zip Code)

For further information concerning this matter, please call:

Jesse Overbay

(Name of Person)

at (865) 315-7351

(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

EyeChek, LLC

2. The Articles of Organization were filed on 3/5/2015 and assigned

document number L15000040678

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)

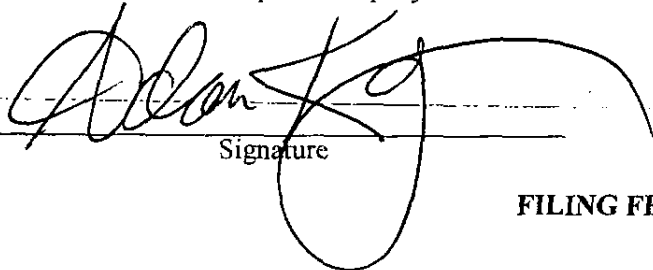
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

The consent of all members, pursuant to section 605.0701(2).

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

ADAM KATZ
Printed Name

FILING FEE: \$25.00

15 OCT - 5 AM 7:20
CLERK OF COURT
STATE OF FLORIDA