# 45000043336

(Requestor's Name)						
(Address)						
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PICK-UP	☐ WAIT	MAIL				
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(Document Number)						
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03/09/17--01010--003 \*\*25.00

FILED

2017 MAR -9 PM 4: 39

SECRETARY OF STATE

K. SALY MAR 1 0 2017

#### **COVER LETTER**

TO:

Registration Section **Division of Corporations** 

iGov ePay 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:

## Jerry Oyler

(Name of Person)

# iGov ePay LLC

(Firm/Company)

1307 S International Parkway, Suite 2061

Lake Mary, FL 32746-1414

(City/State and Zip Code)

For further information concerning this matter, please call:

### Jerry Oyler

 $\frac{407}{100}$  732-6993 x13

(Name of Person)

Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

\$3500 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

2017 MAR -9 PM 4:39

SECRETARY OF STATE
TALL AHASSEE, FLORID.

1.	The name of a limited liabil	ity company is		, 5 %	
	iGov ePay LLC	-		TALL AHASSEE, FL	
2.	The Articles of Organizatio	n were filed on	15	and assigned	
	document numberL150000	43336	_		
3.	The delayed effective date t (effective Note: If the date inserted in t listed as the document's effective	his block does not meet the	applicable statutory filing	ng: 03/06/2017 te document is received for filing) g requirements, this date will not b	
4.	A description of occurrence 605.0707, Florida Statutes, (	that resulted in the limit copy 605.0707 on back of	ed liability company's cover letter).	dissolution pursuant to section	
	It has been determined that iGo	v ePay LLC is not needed	and consequently dissolve	ed effective March 6, 2017.	
5.	If there are no members, ent	er the name and address			
	activities and affairs:	Prasad Valay  1307 S International Parkway, Suite 2016			
		Lake Mary, FL 32746-1414			
6. lis	Signature of an authorized p ted above to wind up the con	erfon or if there are no rapany's activities and aff	nembers, the signature airs: Prasad Valay	of the person appointed and	
	Signature		Printe	ed Name	

FILING FEE: \$25.00