

**L15000006409**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

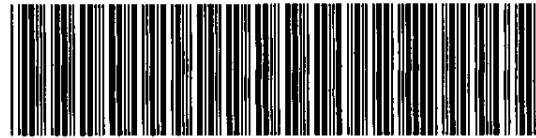
Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

no

Office Use Only



**700294000027**

01/06/17--01008--010 \*\*35.00

MAR 08 2017

**S. YOUNG**

EFFECTIVE DATE  
2/1

17 JAN -6 PM 3:35

FILED STATE  
SECRETARY OF  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 9, 2017

SHAWN RHODUS  
6675 OLD RANCH ROAD  
SARASOTA, FL 34241

SUBJECT: SRC CONSULTING, LLC  
Ref. Number: L15000066409

We have received your document for SRC CONSULTING, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Shelia H Young  
Regulatory Specialist II

Letter Number: 317A00000471

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SECRETARY OF FLORIDA  
TALLAHASSEE, FLORIDA  
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RECEIVED  
2017 MAR -7 AM 10:55  
SECRETARY OF FLORIDA  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT:

SRC CONSULTING 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:

SHAWN RHODUS

(Name of Person)

(Firm/Company)

6675 OLD RANCH RD

(Address)

SARASOTA, FL 34241

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA  
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For further information concerning this matter, please call:

SHAWN RHODUS

(Name of Person)

at

(941) 920-1977

(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

SRC CONSULTING

2. The Articles of Organization were filed on 5/12/2015 and assigned

document number L15000066409

3. The delayed effective date the dissolution if not effective on the date of filing: 2-1-2017  
(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).

CAREER CHANGE

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

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STATE  
SECRETARY OF  
TALLAHASSEE, FLORIDA  
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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

SHAWN RHODUS  
Printed Name

**FILING FEE: \$25.00**

## Notice of Limited Liability Company Dissolution

**NOTE: This page is optional**

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: SRC CONSULTING

Document number of Limited Liability Company is: L15000066409

Date of dissolution was: 2-1-2017

Description of information that must be included in a written claim:

COPY OF INVOICE

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

66675 OLD RANCH RD  
SARASOTA, FL 34241

\_\_\_\_\_  
\_\_\_\_\_

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Shawn Phares  
Printed Name of the Person Filing

[Signature]  
Signature of the Person Filing

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA