

L5000071975

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
16 MAY 10 PM 4:05

MAY 11 2016

S. YOUNG

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Dissolution of JPrice Maintenance LLC

**DOCUMENT NUMBER:** L15000071975

The enclosed **Notice of Limited Liability Company Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**John Price**

\_\_\_\_\_  
(Name of Contact Person)

\_\_\_\_\_  
(Firm/Company)

**7319 Newhall Pass Lane**

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

**Wesley Chapel, FL 33545**

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

**John Price**

\_\_\_\_\_  
(Name of Contact Person)

at ( **305** ) **281-2614**

\_\_\_\_\_  
(Area Code)

\_\_\_\_\_  
(Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &  
Certificate of Status

☐ \$55 Filing Fee &  
Certified Copy

(Additional copy is enclosed)

☐ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

(Additional copy is enclosed)

**MAILING ADDRESS:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA  
16 MAY 10 PM 4:05

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

JPrice Maintenance LLC

2. The Articles of Organization were filed on 4/23/15 and assigned

document number L15000071975

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).

Have been going to the hospital for the majority of 2015 and so far 2016, can't get jobs or focus on LLC

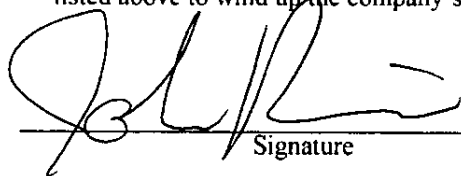
decided to close LLC.

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

John Price

7319 Newhall Pass Lane, Wesley Chapel, FL 33545

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

John Price

Printed Name

**FILING FEE: \$25.00**

16 MAY 10 PM 4: 05

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## Notice of Limited Liability Company Dissolution

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: JPRICE MAINTENANCE LLC

Document number of Limited Liability Company is: L15000071975

Date of dissolution was: April 30, 2016

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

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

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

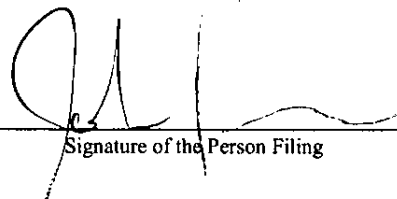
7319 Newhall Pass Lane, Wesley Chapel, FL 33545

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

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.

John Price

Printed Name of the Person Filing



Signature of the Person Filing

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
16 MAY 10 PM 4:05

**Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00**