

L15000075795

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2015 OCT 13 P 12:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

OCT 14 2015

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: dicount depot 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:

khaled mohammad

(Name of Person)

discount depot llc

(Firm/Company)

12048 suellen cir

(Address)

wellington fl 22414

(City/State and Zip Code)

For further information concerning this matter, please call:

khaled mohammad

(Name of Person)

at 561 317 1765

(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

1. The name of a limited liability company is
discount depot llc

2. The Articles of Organization were filed on 04/29/2015 and assigned
document number L15000075795

3. The delayed effective date the dissolution if not effective on the date of filing: 10/08/2015
(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 business deal didn't go through

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

khaled mohammad

12048 suellen cir

wellington fl 33414

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

KHALED MOHAMMAD

Printed Name

FILING FEE: \$25.00

2015 OCT 13 PM 12:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA