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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: DJX2 LL-C (Name of Limited	
(Name of Limited	d Liability Company)
The enclosed Articles of Dissolution and fee(s) are submitte	d for filing.
Please return all correspondence concerning this matter to the	he following:
DAVID Jones	
(Name	e of Person)
	VCompany) SH.
Belleair, Fa	Address) 33756
(City/State	e and Zip Code)
For further information concerning this matter, please call:	727 25 7460
Name of Person)	at (727) 215-7100 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$25,00 Filing Fee and Certificate of Dissolution	☐ \$55.00 Filing Fec, Certificate of Dissolution & Certified Copy (additional copy is enclosed)
MAILING ADDRESS:	STREET/COURIER ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations

P.O. Box 6327

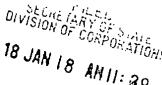
Tallahassee, FL 32314

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY



The name of a limited liability DJV2, LLC			, , , , , , , , , , , , , , , , , , ,
. The Articles of Organization		Pay 15, 2015	and assigned
document number <u>L 15</u>	000086220	<u>, </u>	
The delayed effective date the defective Note: If the date inserted in the listed as the document's effective date.	his block does not meet t	the applicable statutory illi	ling: 12 -3/-17 late document is received for filing) ng requirements, this date will not be
1. A description of occurrence 605.0707, Florida Statutes, (that resulted in the lir copy 605.0707 on bac Business	nited liability company`ek cover letter).	s dissolution pursuant to section
5. If there are no members, ent	er the name and addre	ess of the person appoin	ted to wind up the company's
activities and affairs:	DAVID	C Jones	<u> </u>
	611 Gz	C Jones vdenia St i, R 3375	
	Bellen	in fe 3375	-6
6. Signature of an authorized plisted above to wind up the cor	person or if there are n	no members, the signatur	
Jan &		DAVIL	C Jones
Signature //		Pri	nted Name

FILING FEE: \$25.00