

L15000/02865

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

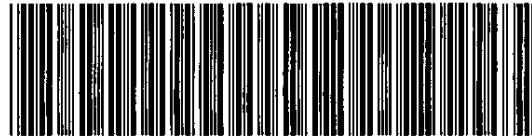
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 MAY 23 P 1:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
MAY 24 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 27, 2017

HAZEL M. WIGGINTON
4400 BAYOU BLVD, STE 5B
PENSACOLA, FL 32503

SUBJECT: DEFENSE BUSINESS SYSTEMS PARTNERS, LLC
Ref. Number: L15000102868

We have received your document for DEFENSE BUSINESS SYSTEMS PARTNERS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The attached form must be completed in order to file the document.

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.

Deborah Bruce
Regulatory Specialist II

Letter Number: 217A00008302

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
2017 MAY 16 PM 12:10
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 11, 2017

HAZEL M. WIGGINGTON
4400 BAYOU BLVD, STE 5B
PENSACOLA, FL 32503

SUBJECT: DEFENSE BUSINESS SYSTEMS PARTNERS, LLC
Ref. Number: L15000102868

RECEIVED
2017 APR 26 PM 4:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for DEFENSE BUSINESS SYSTEMS PARTNERS, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

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.

Deborah Bruce
Regulatory Specialist II

Letter Number: 117A00006994

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dissolving Defense Business Systems Partners
(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:

Hazel Wiggington
(Name of Person)

Defense Business Systems Partners
(Firm/Company)

4400 Bayou Blvd, Suite 5B
(Address)

Pensacola, FL 32503
(City/State and Zip Code)

For further information concerning this matter, please call:

Holly Smith at (850) 266-7086
(Name of Person) (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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

1. The name of a limited liability company is

Defense Business Systems Partners

2. The Articles of Organization were filed on _____ and assigned

document number L15000102868

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).

No revenues have been obtained for this business
and dissolution is approved by all shareholders.

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

Holly Smith
4400 Bayou Blvd, Suite 5B
Pensacola, FL 32503

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

Hazel Wiggin
Printed Name

FILING FEE: \$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2021 MAY 23 P 1:31

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