

L15000113546

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

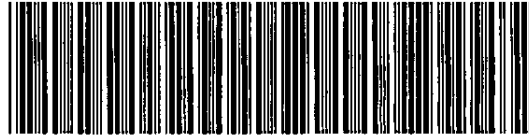
(Document Number)

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

Special Instructions to Filing Officer:

WRONG FORM

Office Use Only



600279957566

12/21/15--01034--015 \*\*55.00

FILED  
2016 JAN 25 PM 2:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER  
JAN 27



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
2016 JAN 25 PM 12:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

December 22, 2015

ROBIN JAMES  
RE: IVY LEAGUE PRESS LLC  
P.O. BOX 2412  
NAPLES, FL 34106

SUBJECT: IVY LEAGUE PRESS LLC  
Ref. Number: L15000113546

We have received your document for IVY LEAGUE PRESS LLC and your check(s) totaling \$55.00. 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.

Karen A Saly  
Regulatory Specialist II

Letter Number: 915A00026811

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Ivy League Press 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:

Robin James  
(Name of Person)  
Ivy League Press LLC  
(Firm/Company)  
P.O. Box 2412  
(Address)  
NAPLES FL 34106  
(City/State and Zip Code)

For further information concerning this matter, please call:

Robin James at ( 239 ) 682-7180  
(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

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

FILED  
2016 JAN 25 PM 2:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Ivy League Press LLC

2. The Articles of Organization were filed on 07/07/2015 and assigned

document number L15000113546

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)

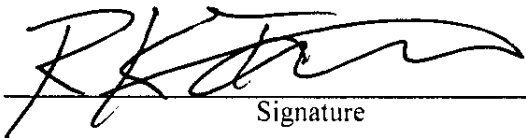
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

Member Consent to Dissolve this LLC,  
Back of Cover Letter.

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

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

Robin James  
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: Tuy League Press LLC

Document number of Limited Liability Company is: L15000113546

Date of dissolution was: \_\_\_\_\_

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

NAME, ADDRESS, Amount of Claim, Original Transaction  
Receipt, Contact Email of Claimant

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

P.O. Box 2412  
NAPLES FL 34106

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.

Robin James

Printed Name of the Person Filing

[Signature]

Signature of the Person Filing

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

FILED  
2016 JAN 25 PM 2:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA