

L15000118230

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

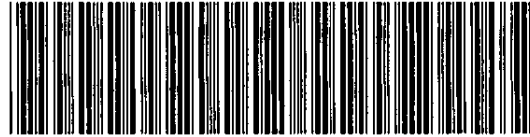
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TAMPA, FLORIDA

AUG 11 2015

S MASON



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 31, 2015

DARIEL MARTIN
1323 SPEARING STREET
JACKSONVILLE, FL 32206

SUBJECT: DARIEL MARTIN, LLC
Ref. Number: L15000118230

We have received your document for DARIEL MARTIN, 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):

We are enclosing the proper form(s) with instructions for your convenience.

You may comply with this request via fax. Please fax correction(s) to the attention of the undersigned examiner at 850-245-6030.

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.

Stacey M Mason
Regulatory Specialist II

Letter Number: 215A00016172

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Daniel Martin, 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:

Daniel Martin
(Name of Person)
Daniel Martin, LLC
(Firm/Company)
1323 Spearing St.
(Address)
Jacksonville, FL 32206
(City/State and Zip Code)

For further information concerning this matter, please call:

Daniel Martin at 904, 613-8148
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee and Certificate of Dissolution
Already on file

☐ \$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**

1. The name of a limited liability company is

Daniel Martin, LLC

2. The Articles of Organization were filed on 7-09-2015 and assigned

document number C15000118230

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).

I decided to close my business due to not
wanting to offer services any longer.

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

Daniel Martin

1323 Spearing St.

Jacksonville, FL 32206

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:

Daniel Martin
Signature

Daniel Martin
Printed Name

FILING FEE: \$25.00

FILED
AUG 10 A 8:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA