

L15000128563

(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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03/20/17--01020--026 **25.00

MAR 21 2017

S. YOUNG

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 MAR 20 PM 12:29



Kissimmee
Park
20 S. Rose Avenue
Avenue
Suite 7
Kissimmee, FL 34741
Park, FL 32792

Tampa
2201 N. West Shore Blvd.
Suite 200
Tampa, FL 33607

Winter
7457 Aloma
Suite 201
Winter

March 17, 2017

Registration Section
Division Of Corporations
P.O. BOX 6327
Tallahassee, FL 32314

Re: **Distortion Transport, LLC**

To Whom It May Concern:

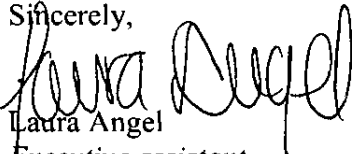
Please be advised that the offices of Carmona Law P.A, have been retained to represent **Distortion Transport, LLC** to file a dissolution of the above mentioned company

For the record, attached please find:

- 1 Dissolution form
- 2 Check #1489 for filing fee

If you have any questions or comments, please feel free to contact me directly at 407-775-2727.

Sincerely,


Laura Angel
Executive assistant

17 MAR 20 PM 12:20
SECRETARY OF STATE
TALLAHASSEE, FL 32306

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DISTORTION TRANSPORT, 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:

MARIE RIVERA

(Name of Person)

DISTORTION TRANSPORT, LLC

(Firm/Company)

5910 Bent Pine Dr APT 206

(Address)

ORLANDO, FL 32822

(City/State and Zip Code)

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STATE
SECRETARY
TALLAHASSEE, FL
17 MAR 20 PM 12:26

For further information concerning this matter, please call:

Marie Rivera

(Name of Person)

at (407) 910-3389

(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**

1. The name of a limited liability company is

DISORTION TRANSPORT, LLC

2. The Articles of Organization were filed on 10/10/2016 and assigned

document number 115000128563

3. The delayed effective date the dissolution if not effective on the date of filing: 03/09/17.
(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 longer in business

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

Marie Rivera
5910 Bent Pine Dr Apt 206
Orlando, FL 32822

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

Marie Rivera
Printed Name

FILING FEE: \$25.00

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
47 MAR 20 PM 12:28

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: DISTORTION TRANSPORT, LLC

Document number of Limited Liability Company is: L15000128563

Date of dissolution was: 03/09/2017.

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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 MAR 20 PM 12:26

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

5910 Bent Pine Dr Apt 206
Orlando, FL 32822

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.

Maria Rivera

Printed Name of the Person Filing

SR

Signature of the Person Filing

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