

L15000142679

(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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11/08/17--01011--028 **25.00

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D SCOTT
NOV 9 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ECONOMIC MOBIL AUTO REPAIR 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:

MANUEL RODRIGUEZ
(Name of Person)

ECONOMIC MOBIL AUTO REPAIR LLC
(Firm/Company)

2508 W. POWHATAN AVE
(Address)

TAMPA FL. 33614
(City/State and Zip Code)

For further information concerning this matter, please call:

MANUEL RODRIGUEZ at (813) 703-7584
(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

6-11-03 10:32 AM

2003 JUN 11 10:32 AM

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

1. The name of a limited liability company is

ECONOMIC MOBIL AUTO REPAIR LLC

2. The Articles of Organization were filed on August 20, 2015 and assigned
document number L15000142679

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.

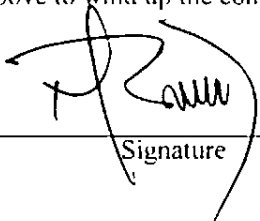
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

FAIL TO DO ANNUAL REPORT
AND NO BUSINESS INCOME

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

MAUEL RODRIGUEZ
2508 W. POWHATAN AVE
Tampa FL 33614

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

Manuel Rodriguez
Printed Name

FILING FEE: \$25.00

FILED

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: ECONOMIC MOBIL AUTO REPAIR LLC

Document number of Limited Liability Company is: L15000142679

Date of dissolution was: 11-2-2017

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

FAIL TO FILE ANNUAL REPORT AND
BUSINESS WAS NOT PRODUCING INCOME

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

2508 W. POWELL HATTON AVE
TAMPA FL 33614

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.

Manuel Rodriguez
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