

L1500052396

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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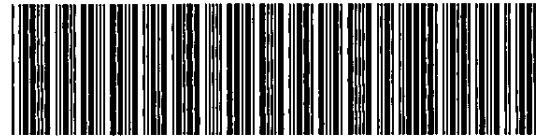
(Business Entity Name)

(Document Number)

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2017 JAN 26 PM 4:28
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TALLAHASSEE, FLORIDA

K. SALY
JAN 27 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 21, 2016

FLYNNASTIC ENTERPRISES LLC
109 AMBERSWEET WAY
SUITE 160
DAVENPORT, FL 33897

SUBJECT: FLYNNASTIC ENTERPRISES LLC
Ref. Number: L15000152396

We have received your document for FLYNNASTIC ENTERPRISES 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.

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.

Dionne M Scott
Regulatory Specialist II

Letter Number: 016A00027151

STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement of Termination:

FIRST: The name of the limited liability company is: FLYNNTASTIC ENTERPRISES LLC
dba MARZANO PIZZA

SECOND: The Florida Document number of the limited liability company is: L15000152396
~~615000089607~~

THIRD: The date of filing of the initial articles of organization is: 28 AUGUST 2015

FOURTH: The date of filing of the dissolution is: 20 OCTOBER 2016

FIFTH: This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.


Signature of Authorized Representative

G FLYNN
Typed or printed name of signature

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TALLAHASSEE, FLORIDA

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