

45000161058

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

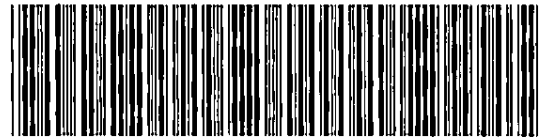
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/17/18--01041--015 ++25.00

RECEIVED

OCT 18 2018

OCT 23 2018
S. YOUNG

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

18 OCT 15 PM 5:06

FILED

JOHN McTYRE
4417 13TH ST (PMB-430)
SAINT CLOUD, FL 34769

October 4, 2018

Florida Department of State
Registration Section
Division of Corporations
P O Box 6327
Tallahassee, FL 32314

RE: MEGA PAWN SAINT CLOUD, LLC
Document # L15000161058

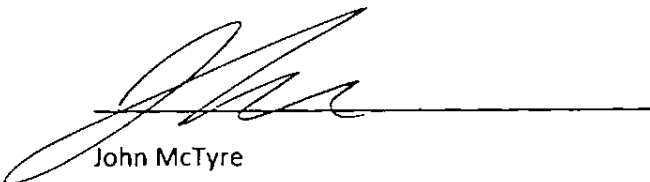
To Whom It May Concern:

Enclosed you will find Check # 3130 in the amount of \$25.00 to cover the Filing Fee and Certificate of Dissolution for Mega Pawn Saint Cloud, LLC. My phone number is 407-256-5598 and my return address is:

4417 13th ST (PMB-430)
Saint Cloud, FL 34769

Please send a letter of acknowledgment and certificate of dissolution after the dissolution has been filed.

Sincerely,


John McTyre

FILED
18 OCT 15 PM 5:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MEGA PAWN SAINT CLOUD, 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:

JOHN McTYRE

(Name of Person)

MEGA PAWN SAINT CLOUD, LLC

(Firm/Company)

4417 13th STREET (PMB-430)

(Address)

SAINT CLOUD, FL 34769

(City/State and Zip Code)

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18 OCT 15 PM 5:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

JOHN McTYRE

(Name of Person)

at (407) 256-5598

(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

MEGA PAWN SAINT CLOUD, LLC

2. The Articles of Organization were filed on 09/22/2015 and assigned

document number L15000161058

3. The delayed effective date the dissolution if not effective on the date of filing: 09/17/2015
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

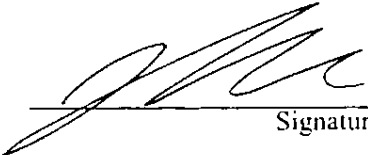
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

SOLD THE ASSETS AND CEASED TO DO 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:

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

JOHN McTYRE

Printed Name

FILING FEE: \$25.00

18 OCT 15 PM 5:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED