

L15000 183 219

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

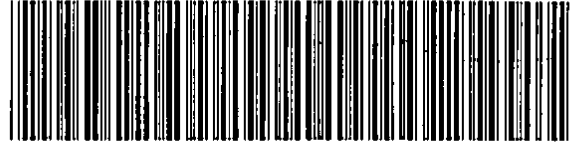
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100331916681

07/29/19--01013--008 \*\*25.00

FILED  
2019 JUL 23 PM 12:51  
JUL 23 2019

Y SULKER

JUL 30 2019

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Communication & Strategy, 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:

Jose Carlos Marroquin

(Name of Person)

Communication & Strategy, LLC

(Firm/Company)

780 South Collier Blvd, Apt 703

(Address)

Marco Island, Florida, 34145

(City/State and Zip Code)

For further information concerning this matter, please call:

Jose Carlos Marroquin

(Name of Person)

at ( 239 ) 5956577

(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

Communication & Strategy, LLC

2. The Articles of Organization were filed on 10/23/2015 and assigned

document number L15000183219

3. The delayed effective date the dissolution if not effective on the date of filing: None  
(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).

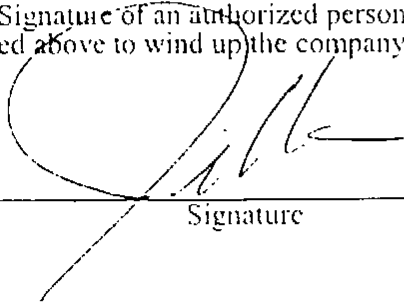
The LLC has not been active or produced any business for what it was incorporated.

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

780 South Collier Blvd, Apt 703

Marco Island, Florida, 34145

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

Edgar Villanueva  
\_\_\_\_\_  
Printed Name

**FILING FEE: \$25.00**