

L15000209015

(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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04/09/18--01004--022 **25.00

18 APR -9 2H11:58
J. LEGGETT
APR 10 2018

J. LEGGETT
APR 10 2018

TO: Registration Section
Division of Corporations

SUBJECT: GARROTT ENTERPRISES, LLC

The enclosed Articles of Dissolution and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Roberto M. Vazquez, Esq.
MOREY LAW FIRM, P.A.
250 N. Orange Ave., Suite 1220
Orlando, FL 32801

For further information concerning this matter, please call:

Roberto M. Vazquez, Esq. at (407) 426-7222

Enclosed is a check for the following amount: \$25.00 Filing Fee

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

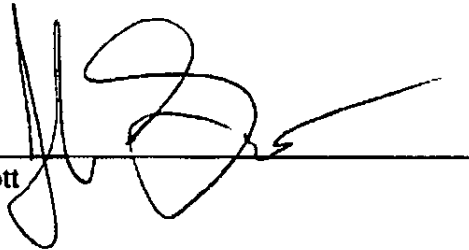
**ARTICLES OF DISSOLUTION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

1. The name of the limited liability company is: GARROTT ENTERPRISES, LLC.
2. The date dissolution was approved: 03/19/2018.
3. A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0701, Florida Statutes: all the members have unanimously agreed in writing to dissolve the company.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

DATED: 4/4/2018

Jeb Garrott

A handwritten signature in black ink, appearing to be 'Jeb Garrott', written over a horizontal line.

18 APR -9 PM 11:58
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 11/19/2018 BY 60322

NOTICE OF LIMITED LIABILITY COMPANY DISSOLUTION

Name of Limited Liability Company: GARROTT ENTERPRISES, LLC

Document number of Limited Liability Company:

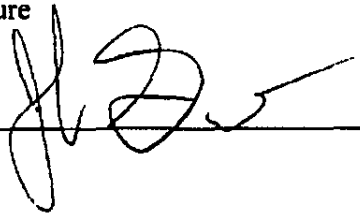
Date of dissolution was: 03/19/2018

Description of information that must be included in a written claim: Date of claim, a copy of the contract, circumstances surrounding claim, and contact information of the person submitting the claim

Mailing address where claims can be sent: 9205 Telfer Run
Orlando, FL 32817

A claim against the limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Signature

A handwritten signature in black ink, appearing to read 'Jeb Garrott', is written over a horizontal line.

Printed Name of the Person Filing

Jeb Garrott