

LL0000112672

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

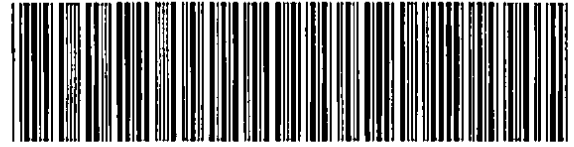
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2019 MAR -6 PM 3:36

CLERK OF COURT
JULIA ROSE, CLERK

C. GOLDEN

MAR 12 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MASON RENTALS FLORIDA LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JAMES C MASON

Name of Person

MASON RENTALS FLORIDA LLC

Firm/Company

120 N ANNIE GLIDDEN RD

Address

DEKALB, IL 60115

City/State and Zip Code

GREGDAVIS@MASONPROPERTIES.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GREG W DAVIS

Name of Person

at (815) 748-0433

Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

120 N. Annie Glidden Road
DeKalb, IL 60115



815-756-1198
Fax: 815-756-1679

February 25, 2019

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

Mason Rentals of Florida LLC
120 N Annie Glidden Rd
DeKalb, IL 60115

RE: Filing Articles of Dissolution, Statement of Termination
Reference # 16000112672

To Whom It May Concern,
Enclosed please find documentation and proof of payment for the
Articles of dissolution and Statement of termination for
Mason Rentals Florida LLC.

If you need anything further please contact me at my information below

Thank you in advance.

Sincerely

Sue Faber
Mason Rentals of Florida LLC
120 N Annie Glidden Rd
DeKalb, IL 60115
Phone 815-748-0401
Fax 815-787-9620
Email fabersa@masonproperties.com

RECEIVED
MAR 06 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 18, 2019

JAMES C. MASON
120 N ANNIE GLIDDEN ROAD
DEKALB, IL 60115

SUBJECT: MASON RENTALS FLORIDA LLC
Ref. Number: L16000112672

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A Statement of Termination may be filed after the limited liability company has completed winding up and after a voluntary dissolution has been filed with this office. See section 605.0709(7), Florida Statutes for reference.

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) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 319A00003444

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: MASON RENTALS FLORIDA LLC

SECOND: The Florida Document number of the limited liability company is: L16000112672

THIRD: The date of filing of the initial articles of organization is: JUNE 10, 2016

FOURTH: The date of filing of the dissolution is: FEBRUARY 25, 2019

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



JAMES C MASON

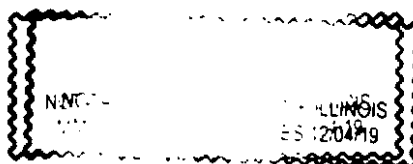
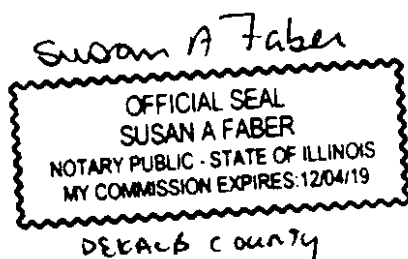
Signature of Authorized Representative

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

CR2E141 (2/14)



2019 MAR -6 PM 3:36

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