L16000126119

(Re	equestor's Name)	
•		
(Ad	ldress)	
(Ad	ldress)	
(,	
(0)	- /C+-4-/7:-/Db	- 40
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
	•	·
(Do	cument Number)	
(50	oument (vamber)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
·	-	-
!		:
		1
		j





900284975369

05/06/16--01024--020 **130.00

16 JUL -8 PH 2: 38
SECRETARY OF STATE
TALLAHASSEE FLORID

MAY 7 3 2016

- 110/16

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJEC	JIMMY G'S HOUSE OF SOUND	LLC	
SUBJEC		imited Liabilit	y Company
The encl	osed Articles of Organization and fee(s)	are submitted	for filing.
Please re	eturn all correspondence concerning this	matter to the fo	ollowing:
	Jim Gasior		
		Name of	Person
	JIMMY G'S HOUSE OF SOUND L	LC	
		Firm/Cor	npany
	6501 SW 48 Street		
		Addre	ss
	Miami, FL 33155		
	ptgasior@gmail.com	City/State and	J Zip Code
	E-mail address: (to be us	ed for future a	nnual report notification)
For furthe	r information concerning this matter, ple	ase call:	
	'Peggy Gasior	305	467-2715
	Name of Person	Area Code	Daytime Telephone Number
Enclose	d is a check for the following amount:		
] \$125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status	Certific	0 Filing Fee & \$160.00 Filing Fee, cd Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Jimmy G's House of Sound

6501 SW 48 Street Miami, FL 33155 305-978-9542 / jgasior@mdc.edu

July 2, 2016

Neysa Culligan, Regulatory Specialist II Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

Dear Ms. Culligan,

Thank you for your correspondence from June 24, 2016 regarding the dissolution of Jimmy G's House of Sound. Please accept this letter as notification that Jimmy G's House of Sound which was voluntarily dissolved in May, 2016, has no intention of revoking the dissolution and releases the name for use to another entity.

Feel free to contact me if you have any questions or concerns. Thank you very much for your assistance.

Sincerely,

Jim Gasior

Jimmy G's House of Sound



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 24, 2016

JIM GASIOR 6501 SW 48 STREET MIAMI, FL 33155

SUBJECT: JIMMY G'S HOUSE OF SOUND LLC

Ref. Number: W16000035379

We have received your document for JIMMY G'S HOUSE OF SOUND LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

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) 245-6052.

Neysa Culligan Regulatory Specialist II

Letter Number: 716A00010194

sent alletter

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must end w	OF SOUND LLC			
	vith the words "Limited	l Liability Company,	, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street ad	dress of the principal o	office of the Limited	Liability Company is:	
Principal Office Address:			Mailing Address:	
6501 SW 48 Street		6501	SW 48 Street	
Miami, FL 33155			ni, FL 33155	
The name and the Florida street a	_	•		16 JUL -8 SLEGGIAR TALLAHASS
	6501 SW 48 Street			P P
		ss (P.O. Box <u>NOT</u> ac	cceptable)	PH 2:
	Florida street addres	. FL	33155	P P
	Florida street addres		. ,	PH 2:

Page 1 of 2

(CONTINUED)

Title: "AMBR" = Author	rized Member	Name and Address:	
"MGR" = Manage			
MGR		Jim Gasior	
		6501 SW 48 Street	
		Miami, FL 33155	
AMBR		Peggy Gasior	
		6501 SW 48 Street	
		Miami, FL 33155	
			
			
effective date is listed e of filing.)	te, if other than the date o	f filing: 05-02-2016 (OPTIONAL) ific and cannot be more than five business days prior to or 90	_
TLE V: Effective date is listed to filling.) If the date inserted	te, if other than the date o	effic and cannot be more than five business days prior to or 90 set the applicable statutory filing requirements, this date will not	
TLE V: Effective date is listed to filling.) If the date inserted	te, if other than the date o cd, the date must be spec- in this block does not me late on the Department of	effic and cannot be more than five business days prior to or 90 set the applicable statutory filing requirements, this date will not	_
TLE V: Effective date is listed to filling.) If the date inserted cument's effective of	te, if other than the date on the date must be specing this block does not melate on the Department of sions, if any.	effic and cannot be more than five business days prior to or 90 set the applicable statutory filing requirements, this date will not	
LE V: Effective da effective date is listate e of filing.) If the date inserted cument's effective of LE VI: Other prov	te, if other than the date on the date must be specing this block does not mediate on the Department of sions, if any. GNATURE:	et the applicable statutory filing requirements, this date will not a State's records.	
CLE V: Effective date is listed to of filing.) If the date inserted cument's effective of the c	te, if other than the date on the date must be special in this block does not me late on the Department of sions, if any. GNATURE: Signature of a men	the applicable statutory filing requirements, this date will not f State's records.	_
CLE V: Effective date is listed to of filing.) If the date inserted cument's effective of the c	in this block does not me late on the Department of sions, if any. Signature of a men This document is execute am aware that any false	the applicable statutory filing requirements, this date will not f State's records. State's records. The property of a member of a member of an authorized representative of a member of an authorized representative of a member of an accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State	be li
CLE V: Effective date is listed to of filing.) If the date inserted cument's effective of the c	in this block does not me late on the Department of sions, if any. Signature of a men This document is execute am aware that any false	the applicable statutory filing requirements, this date will not f State's records. State's records. The property of a member of a member of an authorized representative of a member of an authorized representative of a member of an accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State	be li
CLE V: Effective date is listed to of filing.) If the date inserted cument's effective of the c	in this block does not me late on the Department of sions, if any. Signature of a men finis document is execute am aware that any false constitutes a third degree	the applicable statutory filing requirements, this date will not f State's records. State's records. The property of a member of a member of an authorized representative of a member of an authorized representative of a member of an accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State	be li
CLE V: Effective date is listed to of filing.) If the date inserted cument's effective of the c	in this block does not me late on the Department of sions, if any. Signature of a men This document is execute am aware that any false constitutes a third degree Peggy Gasior	bet the applicable statutory filing requirements, this date will not a State's records. State's records. The provided representative of a member of an authorized representative of a member of a me	