

L16000183935

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

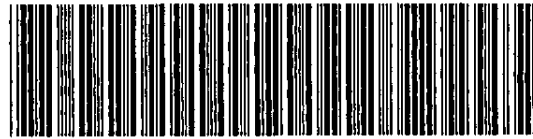
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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300296945253

04/03/17--01033--022 **25.00

FILED
2017 MAY -1 PM 12: 24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
MAY -4 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Reel Return, 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:

Pasquale Antonetti Jr

(Name of Person)

(Firm/Company)

2171 Harlans Run

(Address)

Naples, FL 34105

(City/State and Zip Code)

For further information concerning this matter, please call:

_____ at (_____) _____
(Name of Person) (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**

FILED
2017 MAY -1 PM 12:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
Reel Return, LLC

2. The Articles of Organization were filed on 10/3/2016
and assigned
document number L16000183935

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

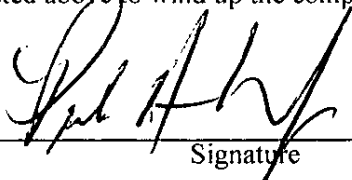
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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):

BUSINESS IS NO LONGER VIABLE
AND ASSETS WERE SOLD

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

Pasquale Antonetti, Jr

Printed Name

FILING FEE: \$25.00



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 5, 2017

PASQUALE ANTONETTI JR.
2171 HARLANS RUN
NAPLES, FL 34105

SUBJECT: REEL RETURN, LLC
Ref. Number: L16000183935

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

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707(1)(c), Florida Statutes, must be contained in the document.

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) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 417A00006522

850-245-6870

RECEIVED
2017 MAY - 1 PM 12:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA