

L17000022086

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

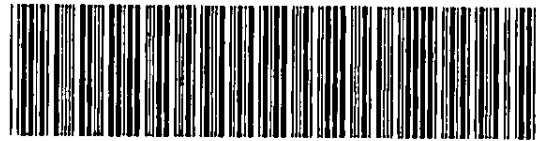
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



500338293135

12/23/13--01029--013 \*\*25.00

R. WHITE

JAN 07 2014

2013/12/23 AM 10:07

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: JEM 2017, 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:

K. Lawrence Gragg

(Name of Person)

(Firm/Company)

11015 Girasol Avenue

(Address)

Coral Gables, FL 33156

(City/State and Zip Code)

For further information concerning this matter, please call:

L. Lawrence Gragg

(Name of Person)

305

613-9235

at ( )

(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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

2019 DEC 23 AM 10:07

1. The name of a limited liability company is  
JEM 2017, LLC

2. The Articles of Organization were filed on 1/27/2017 and assigned  
document number L17000022086

3. The delayed effective date the dissolution if not effective on the date of filing: 12/31/2019  
(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).

Dissolution of business

Dissolution of business

Dissolution of business

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:

K. Lawrence Gragg  
Signature

K Lawrence Gragg

Printed Name

**FILING FEE: \$25.00**

## Notice of Limited Liability Company Dissolution

**NOTE: This page is optional**

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: JEM 2017, LLC

Document number of Limited Liability Company is: L17000022086

Date of dissolution was: 12/31/2019

Description of information that must be included in a written claim:

Amount and the event giving rise to the claim

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Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

11015 Girasol Avenue

Coral Gables, FL 33156

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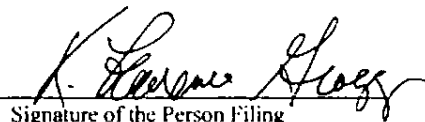
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A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

K. Lawrence Gragg

Printed Name of the Person Filing

  
Signature of the Person Filing

**Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00**