

L17000033093

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

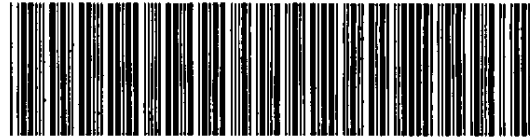
(Business Entity Name)

(Document Number)

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18 FEB 26 AM 9:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
FEB 27 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Boots on the Ground Self Management Support
(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:

Stephanie Poynor

(Name of Person)

Boots on the ground self management support

(Firm/Company)

7709 Landcare Lane

(Address)

Tampa, FL 33616

(City/State and Zip Code)

For further information concerning this matter, please call:

Stephanie Poynor

(Name of Person)

502 4121446

(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
18 FEB 26 AM 9:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
Boots on the ground self management support

2. The Articles of Organization were filed on 2/10/17 and assigned
document number L17000033093

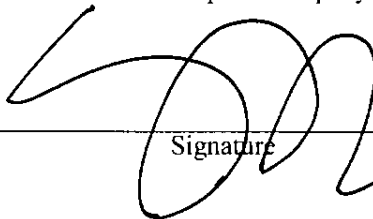
3. The delayed effective date the dissolution if not effective on the date of filing: 2/19/2018
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, 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).

I created this LLC in order to service homeowners without a real estate license. I realized that it wasn't the most c

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Stephanie Poynor 7709 Landcare Lane, Tampa, FL 33616

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

Stephanie L Poynor

Printed Name

FILING FEE: \$25.00