

L170000033487

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

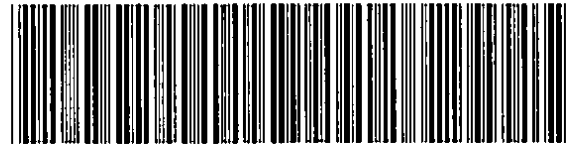
(Business Entity Name)

(Document Number)

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

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12/14/20--01018--010 \*\*25.00

2020 DEC 14 PM 6:21

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JAN 27 2021

S. YOUNG

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1. Board Certified Real Estate
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3. Master Of Laws Taxation
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8. Also Admitted In The Commonwealth Of The Bahamas

December 9, 2020

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

Re: James W. Cooke Enterprises, LLC

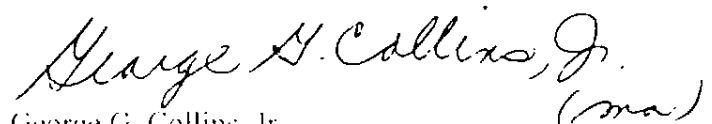
Dear Sir:

Enclosed please find an original and one conformed copy of the Articles of Dissolution for the above named limited liability company. I would appreciate your filing the original with your office and returning the conformed copy with the appropriate certificate to this office.

I am also enclosing our check in the amount of \$25.00 covering the Filing Fee and issuance of the certificate of dissolution.

Thank you for your consideration in this matter.

Sincerely,

  
George G. Collins, Jr.  
For the Firm

GGC, Jr./ma  
Enclosures

PHONE: 772.231.4343 | FAX: 772.234.5213 | WWW.VEROLAW.COM

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

2020 DEC 14 PM 6:21

1. The name of a limited liability company is  
JAMES W. COOKE ENTERPRISES, LLC

2. The Articles of Organization were filed on February 10, 2017 and assigned  
document number L17000033487

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).  
death of a member and consent of the surviving member to dissolve the limited liability company

5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs:

Andrew F. Sowers  
2975 Coconut Palm Road  
VERO BEACH FL 32963

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

Andrew F. Sowers

Printed Name

**FILING FEE: \$25.00**