

L17000068690

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

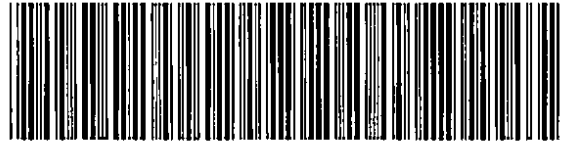
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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06/09/18 10:01:01 001 **25.00

FILED
2018 JUL -2 PM 4:49
CLERK OF SUPERIOR COURT
SAN JOSE, CA

B FIGUEROA

JUL 09 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 13, 2018

CARYN SENDERA
8900 N ARMENIA AVE STE 102
TAMPA, FL 33604

SUBJECT: COMVEST BUILDERS FLORIDA LLC
Ref. Number: L17000068690

We have received your document for COMVEST BUILDERS FLORIDA 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):

The Articles of Dissolution page is missing. Please complete the enclosed page.

Please return the corrected original and one copy of 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.

Brittany M Figueroa
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 418A00012336

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **COMVEST BUILDERS FLORIDA 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:

CARYN SENDERA

(Name of Person)

COMVEST BUILDERS FLORIDA LLC

(Firm/Company)

8900 N AREMNA AVE SUITE 102

(Address)

TAMPA, FLORIDA 33604

(City/State and Zip Code)

RECEIVED
2018 JUL -2 AM 11:38
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

69

For further information concerning this matter, please call:

CARYN SENDERA

(Name of Person)

at (**727**) **710-1738**

(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**

1. The name of a limited liability company is
COMVEST BUILDERS FLORIDA LLC

2. The Articles of Organization were filed on 03/27/2017 and assigned
document number L17000068690

3. The delayed effective date the dissolution if not effective on the date of filing: 12/31/2017
(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.

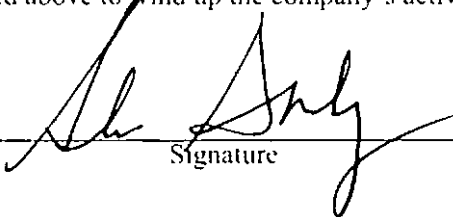
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
LLC WAS CREATED WHEN ANOTHER ACTIVE COMPANY WAS BOUGHT OUT. THE INTENTIONS
WERE TO SWITCH USE TO THIS BUSINESS NAME. THAT NEVER HAPPENED AND THEY WORK
AS THE OTHER BUSINESS - COMVEST BUILDERS LLC. THEY FORGOT TO MAKE THIS ONE
INACTIVE

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

4213 W SEVILLA ST

TAMPA, FLORIDA 33629

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

STEPHEN ARMSTRONG
Printed Name

FILING FEE: \$25.00

↓
PAID
RE-FILING
FORGOT SIGNATURE

2018 JUL -2 PM 4:14
FILED
CLERK OF COURT
HILLSBORO COUNTY
FLORIDA

Notice of Limited Liability Company Dissolution

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: COMVEST BUILDERS FLORIDA LLC

Document number of Limited Liability Company is: L17000068690

Date of dissolution was: 04/01/2017

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

BUSINESS WAS CREATED NOT KNOWING ANOTHER BUSINESS NAME WAS ALL READY

CREATED AND THIS BUSINESS WAS SUPPOSED TO BE DISSOLVED AND IT WAS OVERLOOKED

BUSINESS NEEDS TO BE INACTIVE

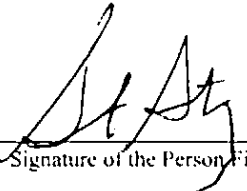
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

4913 W LAUREL ST., SUITE B TAMPA, FLORIDA 33604

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.

STEPHEN ARMSTRONG

Printed Name of the Person Filing


Signature of the Person Filing