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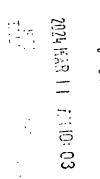
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COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

Division of Corporations		
SUBJECT: JM STAFFING CU	USULTANTS LLC	
(Name of Limited I	Liability Company)	
The enclosed Articles of Dissolution and fee(s) are submitted	for filing.	
Please return all correspondence concerning this matter to the	following:	
MARTIN SCH	AFFER	
(Name o	f Person)	
IM STAFFING CUNSI	ITANTS LLC	
(Firm/Company)		
248 NW 101 AVE		
, , ,	diress)	
PLANTATION, FL 33324		
(City/State a	and Zip Code)	
For further information concerning this matter, please call:		
MARTIN SCHAFFER	7, 954, 591-4494	
(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)	
Marilian Address.	Stepat Address	
<u>Mailing Address:</u> Registration Section	Street Address: Registration Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. T	he name of a limited liability company is
_	JM STAFFING CONSULTANTS LLC
2. T	he Articles of Organization were filed on <u>67/17/2017</u> and assigned
di	Deument number L17000 152774
j	he 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 5.0707, Florida Statutes, (copy 605.0707 on back cover letter)
	RETTRE
_	
_	
	<u> </u>
•	
	there are no members, enter the name and address of the person appointed to wind up the company's entirities and affairs:
	248 NW 101 AJE
	PLANTATION, FL 33324
6. S abov	ignature of an authorized person or if there are no members, the signature of the person appointed and listed wind up the company's activities and affairs:
	Mul John MARTIN SCHAFFER
	p Signature i Printed Name

FILING FEE: \$25.00