

L17000 184 981

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

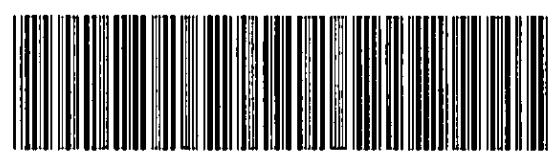
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/12/19--01025--019 **25.00

Effective Date 12/27/2019

FILED
CLERK OF STATE
DIVISION OF CORPORATIONS
19 DEC 12 PM 12:20

DEC 30 2019

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: REDOCTOBER 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:

JOSEPH L. EPSTEIN
(Name of Person)

REDOCTOBER LLC
(Firm/Company)

1533 EMERALD Dunes DRIVE
(Address)

Sun City Center, FL 33573
(City, State and Zip Code)

For further information concerning this matter, please call

Jos. L. EPSTEIN
(Name of Person)

at 575, 361-5325
(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

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CORPORATIONS
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ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

REDOCTOBER LLC

2. The Articles of Organization were filed on

8/30/2017

and assigned

document number

L17000184981

3. The delayed effective date the dissolution if not effective on the date of filing:

12/27/2019

(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).

SECURITY INVESTMENTS DISCONTINUED

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

JOSEPH L EPSTEIN

1533 EMERALD Dunes DRIVE

Sun City Center, FL 33573

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:

Joseph L Epstein
Signature

JOSEPH L EPSTEIN
Printed Name

FILING FEE: \$25.00

19 DEC 12 PM 2:20

DEPT. OF STATE
DIVISION OF CORPORATIONS