

L17000188971

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

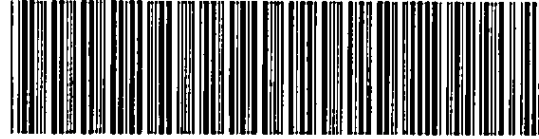
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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12/04/19--01011--004 **25.00

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2020 FEB 13 PM 4:44

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1/16/20

FEB 13 2020
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 8, 2020

SEAN M. WOLFORD
5582 W. PONKAN RD.
APOPKA, FL 32712

SUBJECT: CENTRAL FLORIDA SEAMLESS GUTTERS LLC
Ref. Number: L17000188971

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The Notice of Dissolution must contain a description of information that should be included in a written claim.

Please return 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) 245-6050.

Darlene Connell
Regulatory Specialist II Supervisor

Letter Number: 520A00000423

I spoke with Susan @ Fla Dept. of State on 1/21/2020 @ 3:50pm and it was explained that this form is optional. I would like to just file the Dissolution papers and not a claim. I apologize for not understanding how this form is used.

2020 FEB 13 AM 11:46

RECEIVED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CENTRAL FLORIDA SEAMLESS GUTTERS 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:

SEAN M. WOLFORD

(Name of Person)

CENTRAL FLORIDA SEAMLESS GUTTERS LLC

(Firm/Company)

5582 W. PONKAN RD.

(Address)

APOKA, FL 32712

(City/State and Zip Code)

For further information concerning this matter, please call:

SEAN WOLFORD

(Name of Person)

at 407, 492-3433

(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

CENTRAL FLORIDA SEAMLESS GUTTERS LLC

2. The Articles of Organization were filed on September 5, 2017 and assigned

document number L17000188971

3. The delayed effective date the dissolution if not effective on the date of filing: 12/01/2019
(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).

Stagnant Business Growth

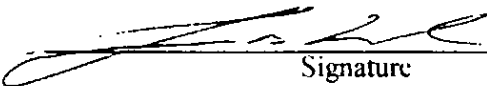
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DIVISION OF CORPORATIONS
2020 FEB 13 PM 4:44

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

5582 W. POKKAN RD.

APOPKA FL 32712

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

SEAN M. WOLFORD
Printed Name

FILING FEE: \$25.00