

48000011047

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

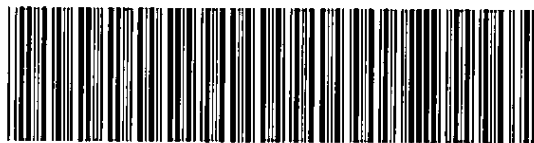
Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE

MAY 15 2023

Office Use Only



900408658689

FILED

2023 MAY 12 AM 10:50

SECRETARY OF STATE
TALLAHASSEE, FL

20

20

2023 MAY 12 AM 11:54

SECRETARY OF STATE
TALLAHASSEE, FL



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 120000000088

Date: 05/12/2023

Name: Merritt Walker

Reference #: 1998894

Entity Name: DP BUSINESS SERVICES LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☒ Dissolution/Withdrawal

☐ Fictitious Name

☒ Other CERTIFIED COPY OF THE FILING EVIDENCE

Authorized Amount: \$55

Signature: mw



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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DP BUSINESS SERVICES 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:

Diane Brown

(Name of Person)

CCB Healthcare Consultants LLC

(Firm/Company)

507 Plum Street, STE 310

(Address)

Syracuse, NY 13204-1469

(City/State and Zip Code)

For further information concerning this matter, please call:

Diane Brown

(Name of Person)

at (315) 477-6253

(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**

FILED
2023 MAY 12 AM 10:50
SECRETARY OF STATE
TALLAHASSEE, FL

1. The name of a limited liability company is
DP BUSINESS SERVICES LLC
2. The Articles of Organization were filed on 01/16/2018 and assigned
document number L18000011047
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).
The consent of the sole member.

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

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:

DocuSigned by

David Pennington

Signature

David Pennington
Printed Name

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

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: DP BUSINESS SERVICES LLC

Document number of Limited Liability Company is: L18000011047

Date of dissolution was: 04/30/2023

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

Name of claimant; Date of initial claim; Amount of claim; and Description.

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


111 Homeport Drive

Palm Harbor, FL 34683-5410

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.

David Pennington

Printed Name of the Person Filing

DocuSigned by


Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00