

L18000018602

(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



300309382593

02/26/18--01010--021 \*\*25.00

FILED

18 FEB 26 AM 9:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY

FEB 27 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MONTO ENTERPRISES 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:

CARLA MCILVEEN CLAY  
(Name of Person)

MONTO ENTERPRISES LLC  
(Firm/Company)

2417 PERSIAN DR. UNIT #41  
(Address)

CLEARWATER FL 33763  
(City/State and Zip Code)

For further information concerning this matter, please call:

CARLA MCILVEEN CLAY at ( 727 ) 225-4370  
(Name of Person) (Area Code & Daytime Telephone Number)  
after Mar 31 (905) 404-2566

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

FILED  
18 FEB 26 AM 9:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

MONTO ENTERPRISES LLC

2. The Articles of Organization were filed on JANUARY 22, 2018 and assigned

document number LI8000018602

3. The delayed effective date the dissolution if not effective on the date of filing: DISSOLUTION: FEBRUARY 23, 2018  
(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).

I WAS INTENDING TO PURCHASE A STORE HERE IN CLEARWATER,

BUT THE DEAL DID NOT COMPLETE AND WAS CANCELLED.

I WILL NOT BE PURCHASING A BUSINESS NOW, AND DO NOT

NEED THIS LLC. I WILL NOT BE COMING TO THE US ON A BUSINESS  
VISA AND WILL BE REMAINING IN CANADA. I AM A CANADIAN CITIZEN

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

activities and affairs: CARLA MCILVEEN CLAY

2417 PERSIAN DR. UNIT #4

CLEARWATER, FL 33763

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:

Carla McIlveen Clay  
Signature

CARLA MCILVEEN CLAY  
Printed Name

FILING FEE: \$25.00