

L18 0000 29606

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

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T.G.  
04/24/19



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 5, 2019

CHARLES DEAN STEWART  
2502 OSWEGO DRIVE  
NORTH PORT, FL 34289

SUBJECT: GOT GUM, LLC  
Ref. Number: L18000029606

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

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707(1)(c), Florida Statutes, must be contained in the document.

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) 245-6052.

Tacarri K Glass  
Regulatory Specialist II

Letter Number: 419A00006874

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AND  
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TALLAHASSEE, FLORIDA  
DIVISION OF STATE

10:00 AM 4/24/19

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Company Dissolution

**DOCUMENT NUMBER:** L18000029606

The enclosed **Notice of Limited Liability Company Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Charles Dean Stewart  
(Name of Contact Person)

Got. Gum LLC  
(Firm/Company)

2502 Oswego Drive  
(Address)

North Port, FL 34289  
(City/State and Zip Code)

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SECRETARY OF STATE  
TALLAHASSEE, FL 32301

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For further information concerning this matter, please call:

Dean Stewart at (941) 200-2714  
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25 Filing Fee

\$ \$30 Filing Fee &  
Certificate of Status

\$ \$55 Filing Fee &  
Certified Copy  
(Additional copy is enclosed)

\$ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy  
(Additional copy is enclosed)

**MAILING ADDRESS:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Amendment 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

GOT - Gun LLC

2. The Articles of Organization were filed on \_\_\_\_\_ and assigned

document number \_\_\_\_\_

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).

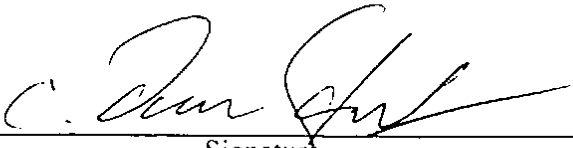
Business terminated because was unable  
to sell idea/service to potential customers.

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

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TALLAHASSEE, FLORIDA

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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

Charles Dean Stewart  
Printed Name

**FILING FEE: \$25.00**