

L180000 64165

(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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18 NOV 29 AM 8:56
FALL RIVER, MA

K SAIN
DEC -5 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LEGION TRANSPORTATION GROUP, 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:

Bonny Brewer

(Name of Person)

Legion Capital Corporation

(Firm/Company)

301 E. Pine St., Suite 850

(Address)

Orlando, FL 32801

(City/State and Zip Code)

For further information concerning this matter, please call:

Bonny Brewer

(Name of Person)

at (407) 986-4234

(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
18 NOV 29 AM 8:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
LEGION TRANSPORTATION GROUP, LLC

2. The Articles of Organization were filed on March 12, 2018 and assigned
document number L18000064165

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).
Unanimous consent of Members.

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

301 E. Pine St., Suite 850

Orlando, FL 32801

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:

Claudia Co.
Signature

Claudia Correa, Authorized Representative
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: LEGION TRANSPORTATION GROUP, LLC

Document number of Limited Liability Company is: L18000064165

Date of dissolution was: NOVEMBER 26, 2018

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

All claims against the assets of the limited liability company must be made in writing
and include the claim amount, basis and origination date

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

Legion Capital Corporation

Attn: Claudia Correa

301 E. Pine St., Suite 850

Orlando, FL 32801

FILED
18 NOV 29 AM 8:56
CLERK OF COURT
STATE OF FLORIDA

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.

Claudia Correa, Authorized Representative

Printed Name of the Person Filing

Claudia Co
Signature of the Person Filing