

Division of Corporations

L1800064406

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : WILSON TAX & ACCOUNTING INC.
Account Number : I20150000107
Phone : (941)625-1925
Fax Number : (941)625-1526

**DISSOLUTION OR WITHDRAWAL
NORTH PORT SHOTOKAN KARATE LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

2019 AUG 29 AM 11:33
SEC. OF STATE
TALLAHASSEE, FL

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TALLAHASSEE, FL

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Corporate Filing Menu

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AUG 30 2019
C. Kinsey

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
North Port Shotokan Karate LLC
2. The Articles of Organization were filed on 3/14/18 and assigned
document number L18000064406
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).
Ceased Operations
5. If there are no members, enter the name and address of the person appointed to wind up the company
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:

Andrew Vale
Signature

Andrew Vale

Printed Name

FILING FEE: \$25.00

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Detail by Entity Name

Florida Limited Liability Company
NORTH PORT SHOTOKAN KARATE LLC

Filing Information

Document Number L18000064406
FEVEIN Number NONE
Date Filed 03/14/2018
State FL
Status ACTIVE

Principal Address

2671 ABBOTSFORD ST.
NORTH PORT, FL 34287

Mailing Address

2671 ABBOTSFORD ST.
NORTH PORT, FL 34287

Registered Agent Name & Address

VALE, ANDREW
2671 ABBOTSFORD ST.
NORTH PORT, FL 34287

Authorized Person(s) Detail

Name & Address

Title AMBR

VALE, ANDREW
2671 ABBOTSFORD ST.
NORTH PORT, FL 34287

Title MGR

VALE, MARTINA
2671 ABBOTSFORD ST.
NORTH PORT, FL 34287

Annual Reports

No Annual Reports Filed

Document Images

03/14/2018 - Florida Limited Liability [View image in PDF format](#)