

L18000094507

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

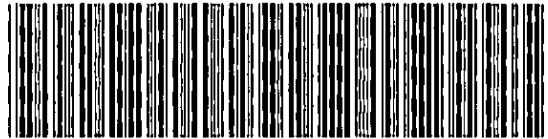
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2021 JAN -4 AM 7:24  
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2011-01-04

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FEB 12 2021

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Jeff The Mower Guy 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:

Jeffrey S. Thompson  
(Name of Person)  
Jeff The Mower Guy LLC  
(Firm/Company)  
10450 Vista Pines Loop  
(Address)  
Clermont, Florida 34711  
(City/State and Zip Code)

For further information concerning this matter, please call:

Jeff Thompson at ( 612 ) 226-5168  
(Name of Person) (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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

2021 JAN -4 AM 7:24

1. The name of a limited liability company is

Jeff The Mower Guy LLC

2. The Articles of Organization were filed on April 16th, 2018 and assigned

document number 618000094507

3. The delayed effective date the dissolution if not effective on the date of filing: 12-29-2020  
(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).

No longer doing business.

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

Jeff Thompson  
10450 Vista Pines Loop  
Clermont FL 34711

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:

Jeff S. Thompson  
Signature

Jeff S. Thompson  
Printed Name

FILING FEE: \$25.00