

L 1 8000 128919

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

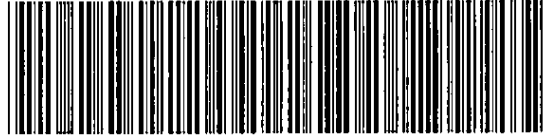
(Document Number)

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2023 JUN -5 AM 8:52

[Handwritten signature]

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dissolution of LLC

DOCUMENT NUMBER: L 18000128919

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

Please return all correspondence concerning this matter to the following:

Donn Sanders

(Name of Contact Person)

D Squared R LLC
(Firm/Company)

11516 150th CT N

(Address)

Jupiter, FL 33478

(City/State and Zip Code)

For further information concerning this matter, please call:

Donn Sanders

at (561)

512-4241

(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:

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

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 13, 2023

DONN SANDERS
11516 150TH CT N
JUPITER, FL 33478

SUBJECT: D SQUARED R, LLC
Ref. Number: L18000128919

We have received your document for D SQUARED R, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The coversheet was the only document submitted.

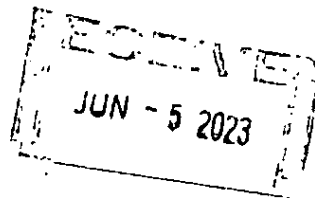
We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6050.

Tammi Cline
Regulatory Specialist II Supervisor

Letter Number: 223A00010962



2023 JUN - 5 AM 8:52

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: D Squared R, 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:

Dann Sanders
(Name of Person)

11516 150th St N
(Address)

Jupiter FL 33478
(City/State and Zip Code)

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2023 JUN -5 AM 8:52
TALLAHASSEE, FL

For further information concerning this matter, please call:

Dann Sanders at 561 512 4241
(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

1. The name of a limited liability company is

D Squared R LLC

2. The Articles of Organization were filed on 5/23/2018 and assigned

document number L18000128919

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).

Covid prevented us from
continuing operations. We
decided to dissolve the
company

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

Dann Sanders
11516 150th Ct N
Jupiter FL 33422

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:

Dann Sanders
Signature

Dann Sanders
Printed Name

FILING FEE: \$25.00

FILED
2023 JUN 5 AM 9:52
TALLAHASSEE, FL