## 18000172300

(Requestor's Name)			
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PICK-UP WAIT MAIL			
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## **COVER LETTER**

TO: Registration Section
Division of Corporations

JaxLookout LLC

SUBJECT:	
(Name of Lim	ited Liability Company)
The enclosed Articles of Dissolution and fee(s) are subm	itted for filing.
Please return all correspondence concerning this matter t	o the following:
Sherry Magill	
(N	ame of Person)
JaxLookout, LLC	
	irm/Company)
3339 Oak Street	· ·
	<u> </u>
Jacksonville, Florida 32205	(Address)
(City/S	tate and Zip Code)
For further information concerning this matter, please ca	11:
Sherry Magill	904 304-8446
	at ()  (Area Code & Daytime Telephone Number)
(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:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

l .	The name of a limited liability company is  JaxLookout, LLC	
2.	The Articles of Organization were filed on and a	ssigned
	document numberL18000172300	
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 documer  Note: If the date inserted in this block does not meet the applicable statutory filing requirer listed as the document's effective date on the Department of State's records.	t is received for filing) nents, this date will not be
١.	A description of occurrence that resulted in the limited liability company's dissolution 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).	•
	JaxLookout, LLC, having failed to create a viable, sustainable business model, determined dissolving	2007
	JaxLookout, LLC warranted.	· ·
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<b>5</b> .	If there are no members, enter the name and address of the person appointed to wind activities and affairs:	
		V
5. ib	Signature of an authorized person or if there are no members, the signature of the peove to wind up the company's activities and affairs:	rson appointed and liste
	Sterry Magel SHERRY MAGIN	
	Signafure Printed Name	

FILING FEE: \$25,00