

L1900000 6966

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

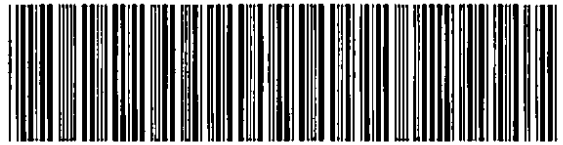
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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07/09/19--01004--011 **55.00

FILED
2019 JUL -9 PM 2:35
JUL 11 2019

Y SULKER

JUL 18 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STORM MARKETING SOLUTIONS 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:

Kari Schmidt
(Name of Person)

STORM MARKETING SOLUTIONS LLC
(Firm/Company)

8032 OLD COUNTRY ROAD 54
(Address)

New Port Richey FL 34653
(City/State and Zip Code)

For further information concerning this matter, please call:

Kari Schmidt at 813, 753-5922
(Name of Person) (Area Code & Daytime Telephone Number)
727 573-1300

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**

1. The name of a limited liability company is

STORM MARKETING SOLUTIONS LLC

2. The Articles of Organization were filed on 01/04/2019 and assigned

document number L19000006966

3. The delayed effective date the dissolution if not effective on the date of filing: 7 3 19
(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.

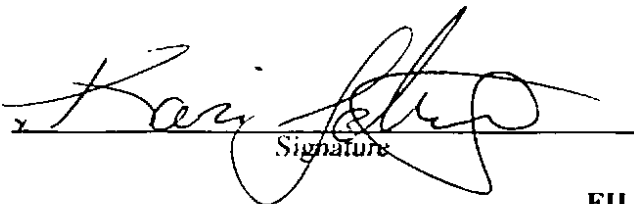
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes. (copy 605.0707 on back cover letter).

FAILED NOT ENOUGH 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: Kari Schmidt

7854 Starfire way
Newport Richey FL 34654

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:


Signature

Kari Schmidt
Printed Name

FILING FEE: \$25.00

2019 JUL -9 PM 2:36
FILED

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: STORM MARKETING SOLUTIONS LLC

Document number of Limited Liability Company is: L19000006966

Date of dissolution was: 01/04/2019

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

COULDN'T GET ENOUGH BUSINESS & GOOD HELP
BAD LOCATION TO STAY OPEN.

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

SCHMIDT KARI SUE J
7854 STARFIRE WAY
NEW PORT RICHEY FL 34654

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.

x Kari Schmidt Printed Name of the Person Filing
x Kari Schmidt Signature of the Person Filing