

L19000118421

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

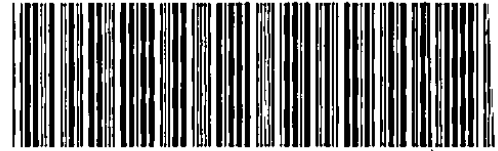
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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COVER LETTER

TO: Registration Section
Division of Corporations

T-Gold LLC

SUBJECT: _____
(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:

Michael Sutherland

(Name of Person)

T-Gold LLC (Registered Agent)

(Firm/Company)

4413 Amalfi Ave

(Address)

Sarasota, FL 34243

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Sutherland

941

737-9813

at (_____)

(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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

2019

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

1. The name of a limited liability company is
T-Gold LLC

2. The Articles of Organization were filed on 01 May 2019 and assigned
document number L19000118421.

3. The delayed effective date the dissolution if not effective on the date of filing: 01 October 2019
(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
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 sec
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
1. Theft of the LLC properties by an initial partner resulting in no remaining means to conduct 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:

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:

Michael P. Sutherland
Signature

Michael P. Sutherland, MCTR
Printed Name

FILING FEE: \$25.00

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 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: T-Gold LLC

Document number of Limited Liability Company is: L19000118421

Date of dissolution was: 01 October 2019

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

1. Date of any claim

2. Location of claim.

3. Detailed description of claim and authority and documentation for such claim.

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

4413 Amalfi Ave

Sarasota, FL 34243

Attention: T-Gold LLC Registered Agent

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.

Michael Sutherland, MGR

Printed Name of the Person Filing

Michael P. Sutherland
Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00