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ALBRITTON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: P.O.I.S.E. BASKETBALL L.L.C.  
(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:

RENAUDO NEMIAH BIGGINS  
(Name of Person)

P.O.I.S.E. BASKETBALL L.L.C.  
(Firm/Company)

4941 CYPRESS HAMMOCK DRIVE  
(Address)

SAINT CLOUD, FL 34771  
(City/State and Zip Code)

For further information concerning this matter, please call:

RENAUDO N. BIGGINS at ( 407 ) 808-8372  
(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



2020 APR 17 AM 4:55

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 31, 2020

CHRISTINE RIGGINS  
4941 CYPRESS HAMMOCK DR  
SAINT CLOUD, FL 34771

SUBJECT: P.O.I.S.E. BASKETBALL L.L.C.  
Ref. Number: L19000121427

We have received your document for P.O.I.S.E. BASKETBALL L.L.C. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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.

Irene Albritton  
Regulatory Specialist II

Letter Number: 420A00007049

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

1. The name of a limited liability company is

D.O.I.S.E. BASKETBALL L.L.C

2. The Articles of Organization were filed on 5/4/19 and assigned

document number L19000121427

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).

This was a youth basketball organization that I had  
no time to truly focus on, so therefore I would rather  
dissolve the organization especially given our current  
community climate.


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

RENALDO NEMIAH RIGGINS

4941 CYPRESS HAMMOCK DRIVE

SAINT CLOUD, FLORIDA 34771

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

RENALDO NEMIAH RIGGINS  
Printed Name

**FILING FEE: \$25.00**

FILED  
2020 APR 17 PM 3:26  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA