

L200000023142

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

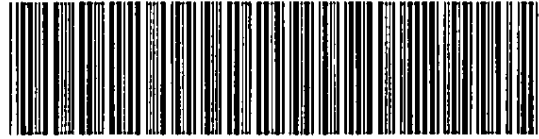
Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

3585.



600398008876

11/28/22--01017--005 **25.00

2023 JUN -5 AM 7:42
TALLAHASSEE, FL
CLERK OF COURT

af 6/13/2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JFF DISTRIBUTOR COMPANY LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JUAN F FERNANDEZ

Name of Person

JFF DISTRIBUTOR COMPANY LLC

Firm/Company

14310 SW8 ST #942253

Address

MIAMI FL 33194

City/State and Zip Code

chmo1125@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Juan F Fernandez

Name of Person

at (305) 968-2222

Area Code Daytime Telephone Number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 20, 2023

JUAN F FERNANDEZ
14310 SW 8 STREET #942253
MIAMI, FL 33194

SUBJECT: JFF DISTRIBUTOR COMPANY LLC
Ref. Number: L20000023142

We have received your document for JFF DISTRIBUTOR COMPANY LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

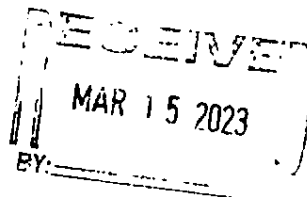
A Statement of Termination may be filed after the limited liability company has completed winding up and after a voluntary dissolution has been filed with this office. See section 605.0709(7), Florida Statutes for reference.

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.

Claretha Golden
Regulatory Specialist II

Letter Number: 123A00004086



STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement of Termination:

FIRST: The name of the limited liability company is: JEFF DISTRIBUTOR COMPANY LLC

SECOND: The Florida Document number of the limited liability company is: L20000023142

THIRD: The date of filing of the initial articles of organization is: 01/15/2020

FOURTH: The date of filing of the dissolution is: 11/16/2022

FIFTH: This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.

I DETERMINE TO TERMINATE THE OPERATION OF THIS COMPANY AS BUSSINES WILL BE CLOSE



Signature of Authorized Representative

JUAN F FERNANDEZ

Typed or printed name of signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)