

h20 000070555

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

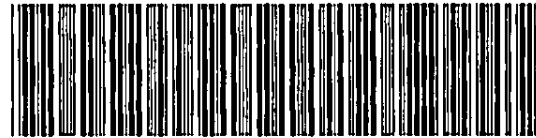
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300387606223

05/18/22--01012--006 **25.00

FILED

2022 MAY 18 PM 1:24

SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CORVETTES AND EXOTIC CARS OF CENTRAL FLORIDA,
(Name of Limited Liability Company) LLC

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

WILLIAM F MEYER
(Name of Person)

CORVETTES AND EXOTIC CARS OF CENTRAL FLORIDA
(Firm/Company) LLC

4170 ABERDEEN CIR.
(Address)

ROCKLEDGE FL 32955
(City/State and Zip Code)

For further information concerning this matter, please call:

WILLIAM F. MEYER at (321) 412-1900
(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

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

1. The name of a limited liability company is

Corvettes And Exotic Cars of Central Florida, LLC

2. The Articles of Organization were filed on 2-20-20 and assigned

document number L2000070555

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).

closed business

FILED
2022 MAY 18 PM 1:24
SECRETARY OF STATE
TALLAHASSEE, FL

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

William F. Meyer

4170 Aberdeen Cir.

Rockledge, FL 32955

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:

William F. Meyer
Signature

WILLIAM F. MEYER
Printed Name

FILING FEE: \$25.00