

120 0000 79137

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
2021 MAY -4 PM 12:07

JUN 18 2021
R. HUNT

COVER LETTER

TO: Registration Section
Division of Corporations

WILKING LEGAL, PLLC

SUBJECT: _____
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:

John Wilking

Name of Person

Firm/Company

15100 SW 87th Avenue

Address

Palmetto Bay, Florida 33176

City/State and Zip Code

JWilk9919@gmail.com

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

For further information concerning this matter, please call:

John Wilking

954

854-4007

at (_____) _____

Name of Person

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

STATEMENT OF TERMINATION

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

WILKING LEGAL, PLLC

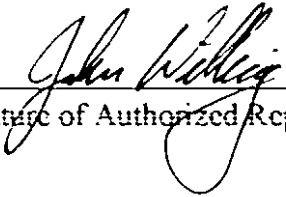
FIRST: The name of the limited liability company is: _____

SECOND: The Florida Document number of the limited liability company is: 1.20000079137

THIRD: The date of filing of the initial articles of organization is: 03/11/2020

FOURTH: The date of filing of the dissolution is: 04/22/2021

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



Signature of Authorized Representative

John E. Wilking

Typed or printed name of signature

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

2021 MAY -14 PM 12:07
SECRETARY OF STATE
DIVISION OF CORPORATIONS