

L20 000 230903

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

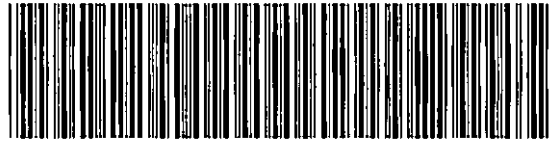
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

per
Derek Anderson
Frank Ruff has been arrested
in connection with this
case.

DC
12/30/20

Office Use Only



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10/01/20--01023--002 **25.00

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2020 DEC 30 P 4:40

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 16, 2020

JUAN GOMEZ
80 W. LIVE OAK ST.
TARPON SPRINGS, FL 34689

SUBJECT: PA PA T'S STEAKHOUSES LLC
Ref. Number: L20000230903

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

PLEASE COMPLETE THE ENTIRE FORM IN ITS ENTIRETY. PLEASE ALSO SEND A STATEMENT OF FACT STATING THE REASON FOR FILING AND EXACTLY THE REASON WHY YOU ARE NEEDING TO FILE A DISSOLUTION. PLEASE CALL IF YOU NEED SOME HELP. CALL DARLENE AT 850-245-6906.

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.

Darlene Connell
Regulatory Specialist II Supervisor

Letter Number: 620A00025413



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 16, 2020

JUAN GOMEZ
80 W. LIVE OAK ST.
TARPON SPRINGS, FL 34689

SUBJECT: PA PA T'S STEAKHOUSES LLC
Ref. Number: L20000230903

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

PLEASE ADD THE DOCUMENT NUMBER TO YOUR DOCUMENT. PLEASE LIST THE DOCUMENT NUMBER L20000230903.

The Notice of Dissolution must contain a description of information that should be included in a written claim. The description may include but not limited to who is filing the claim, the amount of the claim and a reason the claim is being filed.

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.

Darlene Connell
Regulatory Specialist II Supervisor

Letter Number: 720A00022938

To whom it may concern

Division Of Corporation

Im writing this letter to Close a LLC that was open Fraudulent under my name By Mr Frank Roof,

I do not owned this restaurant **Papa T's Steak House LLC** Document id L20000230903 date filed 08/01/20 80 w live oak st Tarpon spring fl 34689.

I didn't know or sign any documents about this LLC or previous corporation on the name of Papa Ts steakhouse LLC

If you have any question, please don't hesitate to contact me.

ps

here is the Detective in charge of this case please contact him if you need to.

Detective: Derek Anderson

Tarpon Spring Police department

44 s Huey Ave

Tarpon Spring Fl , 34689

(727)938-2849

Danderson@tspd.us

Sincerely Yours

Juan Gomez

(813)210-3031

14132 Sweetshrub Ct

Brooksville, fl 34613

Acdecor.llc@gmail.com

A handwritten signature in black ink, appearing to read 'Juan Gomez', is written over a horizontal line. The signature is stylized with loops and a long horizontal stroke extending to the right.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Papa T's Steakhouse LLC.
(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:

Juan Gomez
(Name of Person)

(Firm/Company)

80 W. Live Oak St
(Address)

Tarpon Springs FL 34689.
(City/State and Zip Code)

For further information concerning this matter, please call:

Juan. Gomez at (813) 210-3031
(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

PA PA T'S STEAKHOUSES LLC

2. The Articles of Organization were filed on 08/01/20 and assigned

document number L20000230903

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 LLC WAS FRAUDULENTLY FILED WITH THE SECRETARY OF STATE BY FRANK ROOF. I DID NOT KNOW ANYTHING ABOUT THIS LLC THAT WAS FILED USING MY NAME. THE POLICE DEPARTMENT IN TARPON SPRINGS WITH DETECTIVE DEREK ANDERSON HAS BEEN HANDLING MY CASE.

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:


Signature

Juan Gomez
Printed Name

FILING FEE: \$25.00

FILED
2020 DEC 30 P 4:40
SECRETARY OF STATE
FLORIDA