

121000097611

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

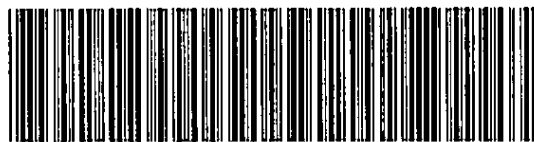
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Q. SILAS

MAR 17 2022

Office Use Only



100382727451

03/09/22--01014--008 ++25.00

FILED
2022 MAR -8 AM 9:45
SECRETARY OF STATE
TALLAHASSEE, FL.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jaded Paladin Entertainment
(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:

Jeffrey C. Lester
(Name of Person)
Jaded Paladin Entertainment
(Firm/Company)
PO Box 5956
(Address)
Sun City Center FL 33571
(City/State and Zip Code)

For further information concerning this matter, please call:

Jeffrey C. Lester at (405) 501-0199
(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

FILED

2022 MAR -8 AM 9:45

1. The name of a limited liability company is

Jaded Paladin Entertainment LLC SECRETARY OF STATE
TALLAHASSEE, FL

2. The Articles of Organization were filed on March 5th 2021 and assigned

document number L 21 000097611

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).

I formed the LLC to publish a graphic novel to try
to start a business in writing but my wife told me
I didn't have time for that and I should stop the project so I took her

advice. No contracts have been signed using the LLC, no activity has occurred with LLC.
I am the only member-manager of the LLC. No business has been conducted with the LLC.

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

activities and affairs:

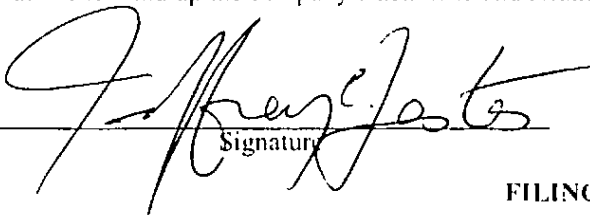
myself - no activities or affairs to wind up

Jeffrey C. Lester

PO Box 5956

Sun City Center, FL 33571

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

Jeffrey C. Lester
Printed Name

FILING FEE: \$25.00

03/04/22