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(Requestor's Name)	
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CENETERIA J.

## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Brian Thackers	///
Name of Lin	nited Liability Company
Dear Sir or Madam:	
The enclosed Statement of Termination and fee(s)	are submitted for filing.
Please return all correspondence concerning this m	natter to the following:
Brian Thacker Name of Person	
Name of Person	
Brian Macker, LLC	
Name of Person  Brian Thacker, LLC  Firm/Company  171 Sweetbrief Branch Ln  Address	
Address  St. John's, F1 32259  City/State and Zip Code	
City/State and Zip Code	
Thackers (to be used for future annual repo	(UM ort notification)
For further information concerning this matter, ple	
Brian Thacker at	904) 528 - 1633 Lirea Code Daytime Telephone Number
Name of Person A	rea Code Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

CR2E141 (2/14)

Tallahassee, FL 32314





## RECEIVED

2022 JUN - 7 PM 12: 08

STOR. TALLANASCIE. (E)

FLORIDA DEPARTMENT OF STATE Division of Corporations

May 21, 2022

BRIAN THACKER 171 SWEETBRIER BRANCH LANE ST. JOHNS, FL 32259

SUBJECT: BRIAN THACKER, LLC Ref. Number: L21000110993

We have received your document for BRIAN THACKER, LLC and your check(s) totaling \$55.00. 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.

Letter Number: 822A00011605

Claretha Golden Regulatory Specialist II

www.sunbiz.org

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## 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: Brian Thacker, LLC
SECOND: The Florida Document number of the limited liability company is: <u>L21000110993</u>
<b>THIRD</b> : The date of filing of the initial articles of organization is: $03/08/2021$
FOURTH: The date of filing of the dissolution is: $04/11/2022$
FIFTH: This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.  Yes. Never utilized this LLC. No longer anticipate using it.
Signature of Authorized Representative  Brian Thacker  Typed or printed name of signature
Filing Fee: \$25.00  Certified Copy. \$30.00 (optional)  CR2E141 (2/14)
CR2E141 (2/14)