

L21000147945

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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WAIT

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MAIL

(Business Entity Name)

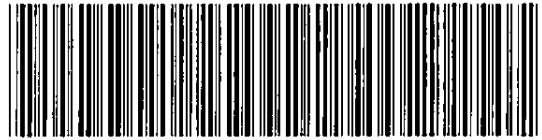
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SECRET  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** McLeod Brock Law, PLLC

\_\_\_\_\_  
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lindsey C. Brock III

\_\_\_\_\_  
(Name of Person)

Lindsey Brock Law, P.A.

\_\_\_\_\_  
(Firm/Company)

9995 Gate Parkway, Ste. 400

\_\_\_\_\_  
(Address)

Jacksonville, FL 32246

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Lindsey C. Brock III

\_\_\_\_\_  
(Name of Person)

904 996-1144

at (\_\_\_\_\_) \_\_\_\_\_  
(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

McLeod Brock Law, PLLC

2. The Articles of Organization were filed on March 30, 2021 and assigned

document number L21000147945

3. The delayed effective date the dissolution if not effective on the date of filing: March 31, 2024  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

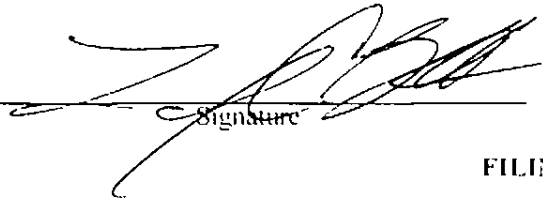
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

Consent of all members to dissolution

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

Lindsey C. Brock III

Printed Name

**FILING FEE: \$25.00**

2024 APR -3 AM 8:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED