

L220000063689

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

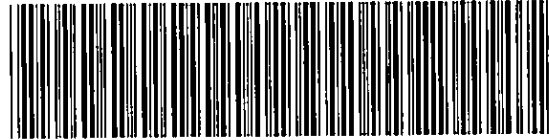
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04/21/23--01015--001 \*\*55.00

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2023 APR 21 AM 6:22  
CLERK OF STATE  
TALLAHASSEE, FL

R. HUNT  
04/21/23

# COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 1360 Jamaica, 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:

David M. Platt

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

David M. Platt, P.A.

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

14782 Calusa Palms Dr., Unit 104

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

Fort Myers, Florida 33919

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

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TALLAHASSEE STATE

For further information concerning this matter, please call:

David M. Platt

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

239

472-5400

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  
1360 Jamaica, LLC
2. The Articles of Organization were filed on 2/01/2022 and assigned  
document number L22000063689
3. The delayed effective date the dissolution if not effective on the date of filing: 4/30/2023  
(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).

The Members of the Company have unanimously adopted a Plan of Dissolution, directing that the Company shall  
pay its debts, file it final tax return and distribution remaing assets to the Members in proportion to their Members

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

Jozef Nejmark, Member  
Printed Name

**FILING FEE: \$25.00**

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STATE

## Notice of Limited Liability Company Dissolution

**NOTE: This page is optional**

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: 1360 Jamaica, LLC

Document number of Limited Liability Company is: 22000063689

Date of dissolution was: 4/31/2023

Description of information that must be included in a written claim:

Identify the name and address of the Claimant, the amount claimed to be due, the nature of the services rendered or goods received, and an invoice for the goods or services stating the date that the goods or services were delivered.


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Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Jozef Nejmark  
401 Kelvin Blvd.  
Winipeg, Manitoba Canada R3P0J3

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Jozef Nejmark  
Printed Name of the Person Filing

  
Signature of the Person Filing

**Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00**