L22000370634

(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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TALLAHASSEE, FLORIDA

09/28/22--01011--014 **25.00

DEC 22 2022

S. PRATHER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Decks Top Shelf 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:

Jefferson L. Purvis
(Name of Person)

Decks Top Shelf LLC
(Firm/Company)

3300 Rowe Ave.
(Address)

Bryceville Fla. 32009
(City/State and Zip Code)

For further information concerning this matter, please call:

Jefferson Purvis at (904) 759-7588
(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

FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is
Deck's Top Shelf LLC

2. The Articles of Organization were filed on Aug. 23 2022 and assigned document number L22003706 34

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).
We formed this LLC because we thought it was what we needed. later we found out that it is not what we need at all. So, we like to have it dissolved.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
Jefferson Purvis
3300 Route Ave.
Bryceville Fla. 32009

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:

J. L. Purvis
Signature

J. L. Purvis
Printed Name

FILING FEE: $25.00

2022 SEP 28 PM 3:01