

L22000 381d081

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

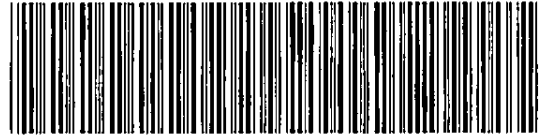
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
MAR 10 2023

JH

Office Use Only



000402117990

RECEIVED
2023 MAR -9 AM 9:30
SECRETARY OF
TALLAHASSEE, FLORIDA

RECEIVED
2023 MAR -9 PM 4:11
DEPT. OF REVENUE
TALLAHASSEE, FLORIDA



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 120000000088

Date: 03/09/2023

Name: Chris Vick

Reference #: 1932848

Entity Name: ENTERPRISE VISION, LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

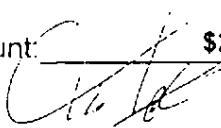
☒ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other

FILE FIRST

Authorized Amount: \$25.00

Signature: 



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☐ Other _____

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Authorized Amount: \$25.00

Signature: 

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Enterprise Vision, 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:

Angeline D. Worley

(Name of Person)

Coolidge Wall, L.P.A.

(Firm/Company)

33 West First Street, Suite 600

(Address)

Dayton, Ohio 45402

(City/State and Zip Code)

For further information concerning this matter, please call:

Angeline D. Worley

937

449-5531

at (_____) _____

(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**

2023 MAR -9 AM 9:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Enterprise Vision, LLC

2. The Articles of Organization were filed on September 8, 2022 and assigned

document number L22000386681

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).

This registration was made in error.

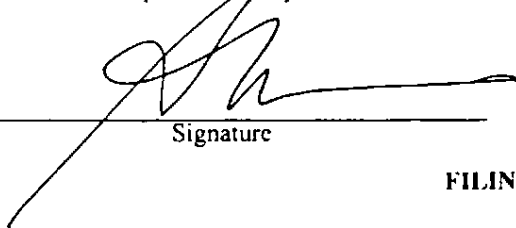
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Sam Warwar, Esq.

33 West First Street, Suite 600

Dayton, Ohio 45402-1289

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

Sam Warwar, Esq., Authorized Representative

Printed Name

FILING FEE: \$25.00

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: Enterprise Vision, LLC

Document number of Limited Liability Company is: L22000386681

Date of dissolution was: _____

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

All claims shall be presented in writing at the address set forth below and shall identify the claimant and contain sufficient information to reasonably inform the limited liability company of the substance of the claim.

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

Christopher Copeland

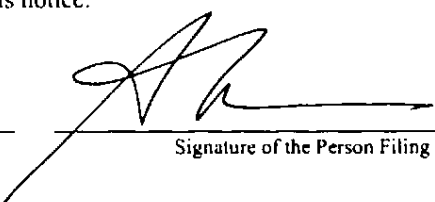
1021 Packer Street

Key West, Florida 33040

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.

Sam Warwar, Esq., Authorized Representative

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