

L 22000449721

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(Address)

(City/State/Zip/Phone #)

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2022 NOV 21 AM 7:50  
CLERK OF COURT  
TALLAHASSEE, FL

Handwritten signature

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: James Corcoran Lic  
\_\_\_\_\_  
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fees(s) are submitted for filing

Please return all correspondence concerning this matter to the following:

James Corcoran  
\_\_\_\_\_  
(Name of Person)  
  
\_\_\_\_\_  
(Firm/Company)  
  
3311 Papaya Rd  
\_\_\_\_\_  
(Address)  
  
Venice, FL 34293  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

James Corcoran  
\_\_\_\_\_  
(Name of Person) 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

FILED

2022 NOV 21 AM 7:50

SEC. STATE  
TALLAHASSEE, FL

1. The name of a limited liability company is

James Corcoran, LLC

2. The Articles of Organization were filed on October 19, 2022

and assigned

document number 122000449721

3. The delayed effective date the dissolution if not effective on the date of filing: November 17, 2022  
(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).

Poor health

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

3311 Papaya Rd Venice FL 34293

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:

*Nancy Corcoran*  
Signature

Nancy Corcoran

Printed Name

FILING FEE: \$25.00