

L23000018977

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

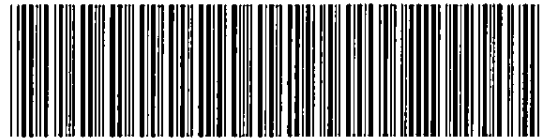
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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12/10/24--01004--028 **25.00

2024 DEC 10 PM 3:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FDRILLING, 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:

Tyler Johnson
(Name of Person)
Threlkeld Law, P.A.
(Firm/Company)
3003 Tamiami Trail N., Suite 400
(Address)
Naples, FL 34103
(City/State and Zip Code)

For further information concerning this matter, please call:

Tyler Johnson at (239) 234-5034
(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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

FDRILLING, LLC

2. The Articles of Organization were filed on 01/09/2023 and assigned

document number L23000018977

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).

Unanimous agreement of all Members to wind up all business affairs and formally dissolve the Company.

Unanimous agreement of all Members to wind up all business affairs and formally dissolve the Company.

Unanimous agreement of all Members to wind up all business affairs and formally dissolve the Company.

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

DocuSigned by:

Christopher W. Risso

F53CF0F06578480
Signature

Christopher W. Risso

Printed Name

FILING FEE: \$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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: FDRILLING, LLC

Document number of Limited Liability Company is: L23000018977

Date of dissolution was: December 3, 2024

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

Name of Company alleging a debt is owed _____

Written description of debt and full settlement amount of debt alleged to be owed _____

Mailing address, email and phone number of Company alleging a debt is owed _____

Copy of all signed contracts or correspondence that establishes the debt owed _____

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

2026 Henley Place

Fort Myers, FL 33901

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.

Christopher W. Risso

Printed Name of the Person Filing

DocuSigned by:

Christopher W. Risso

552CF0F05672480

Signature of the Person Filing

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

SECRETARY OF STATE
MAIL ADDRESS, FLORIDA

2024 DEC 10 PM 3:41

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