

L230004311008

(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
NOV - 5 2024

Office Use Only



300439047853

2024 NOV - 11 11:03

2024 NOV - 11 PM 4:33



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: x61563

To: Department Of State, Division Of Corporations
From: Shauna Godbolt
Ext: x61563
Date: 11/04/24
Order #: 1669965-1
Re: Jt Horizons, LLC
Processing Method: Routine

TO WHOM IT MAY CONCERN:

A handwritten signature in black ink, appearing to read "Shauna Godbolt", is written over a horizontal line.

Enclosed please find:

Application for Dissolution/Cancellation/Termination

Amount to be deducted from our State Account: \$25.0 - FL State Account Number:
120000000195

Please take the following action:

File in your office on basis
Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JT Horizons, 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:

Joseph T. Birli

(Name of Person)

JT Horizons, LLC

(Firm/Company)

1863 Bethany Rd

(Address)

Womelsdorf, PA 19567

(City/State and Zip Code)

For further information concerning this matter, please call:

Joseph T. Birli

(Name of Person)

at

(610) 329-1141

(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**

2024 REC - 11:03

1. The name of a limited liability company is
JT Horizons, LLC

2. The Articles of Organization were filed on September 18, 2023 and assigned
document number L23000431608

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.

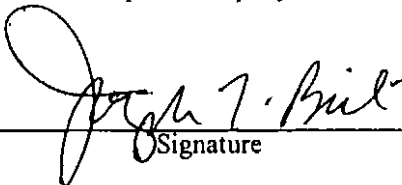
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
The company never transacted business.

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: Joseph T. Birli

1863 Bethany Rd

Womelsdorf, PA 19567

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

Joseph T. Birli

Printed Name

FILING FEE: \$25.00

DIS-27240

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: JT Horizons, LLC

Document number of Limited Liability Company is: L23000431608

Date of dissolution was: 11/01/2024

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

Name, address, phone number, and email address of claimant along with a description of the claim and date of occurrence.

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

Joseph T. Birli

JT Horizons, LLC

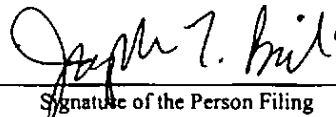
1863 Bethany Rd

Womelsdorf, PA 19567

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.

Joseph T. Birli

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