

PD6000032191

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

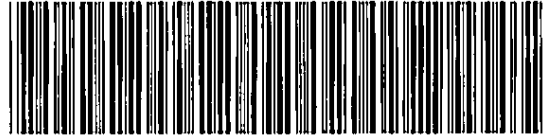
(Business Entry Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200380393252

FILED

2022 JAN 25 AM 10:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2022 JAN 25 PM 1:56

TALLAHASSEE, FLORIDA

JAN 26 2022

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 1/25/22

NAME: JJLMC SERVICES, INC

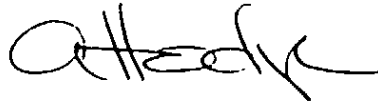
TYPE OF FILING: DISSOLUTION

COST: 43.75

RETURN: *Certified* COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE



FILED

2022 JAN 25 AM 10:05

ARTICLES OF DISSOLUTION

SECRETARY OF STATE
TALLAHASSEE, FL

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:
JLMC SERVICES, INC.

SECOND: The document number of the corporation (if known): P06000032191

THIRD: The date dissolution was authorized: JANUARY 14, 2022

Effective date of dissolution if applicable: DATE AND TIME OF FILING

(no more than 90 days after dissolution file date)

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.

FOURTH: Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.

Signature: Lynne Marie Campolong
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

LYNNE MARIE CAMPOLONG

(Typed or printed name of person signing)

PRESIDENT, SECRETARY, TREASURER AND DIRECTOR

(Title of person signing)

Filing Fee: \$35