

P97 000000 4021

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

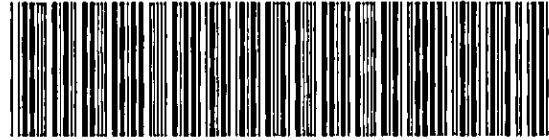
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Mr. M. Williams approved date of
Dissolution change on 10/6/20
see email

8

Office Use Only



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2020 OCT -6 PM 12:11

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 1, 2020

MAUREEN LARICHE
J.M.J.J. INC.
340 SENECA LANE
BOCA RATON, FL 33487

SUBJECT: J.M.J.J. INC.
Ref. Number: P97000004021

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must state the date the dissolution was authorized.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 420A00016793

KALEEL & ASSOCIATES

Attorneys and Counsellors at Law

54 NE 4th Ave. Delray Beach, FL 33483

MARK D. MCWILLIAMS, P.A.

Attorney at Law/CPA

mmcwilliams@kmlpa.com

P: 561-279-4201

F: 561-278-9462

August 17, 2020

Amendment Section
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

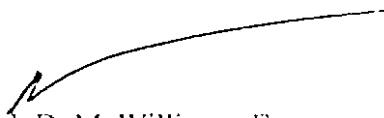
RE: J.M.J.J., Inc.

To Whom It May Concern:

Enclosed is a copy of a cancelled check for \$35.00, which was for the attached Articles of Dissolution filing. The State cashed the check but did not process the dissolution filing forms. Please process the attached forms and dissolve the above company ASAP.

If you have any questions, please call me. Thank you for cooperation and attention to this matter.

Very truly yours,



Mark D. McWilliams, Esq.

MDM/ars

COVER LETTER

TO: Amendment Section
Division of Corporations

2021-10-01 11:01

SUBJECT: J.M.J.J INC.

DOCUMENT NUMBER: P97000004021

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MAUREEN LARICHE

(Name of Contact Person)

(Firm/Company)

340 SENECA LANE

(Address)

BOCA RATON, FLORIDA 33487

(City/State and Zip Code)

For further information concerning this matter, please call:

MARK MCWILLIAMS, ESQ.

at (561-279-4201

(Name of Contact Person)

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee
 ☐ \$43.75 Filing Fee & Certificate of Status
 ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
 ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF DISSOLUTION

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:
J.M.J.J. INC.

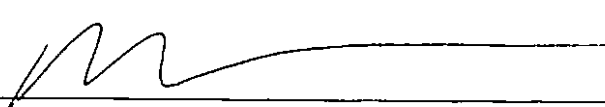
SECOND: The document number of the corporation (if known): P97000004021

THIRD: The date dissolution was authorized: June 1, 2020

Effective date of dissolution if applicable: 06/01/2020
(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: 

(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)

MAUREEN LARICHE

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

2020 OCT -6 PM 12:11

Filing Fee: \$35