LOS 000033484

(Red	questor's Name)	
(Add	iress)	
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(City	//State/Zip/Phone	e #)
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COVER LETTER

TO:

Registration Section Division of Corporations

SURTECT

D&A Investments, 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:

Tony J Apicella Jr.					
(Name of Person)					
(Firm/Company)					
2480 Rainey Court					
(Address)	· · · · · · · · · · · · · · · · · · ·				
Oviedo, FL 32766					
(City/State and Zip Code)					

For further information concerning this matter, please call:

Tony Apicella

_,407

252-8815

(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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liabi	lity company is			_•
2.	The Articles of Organization	on were filed on	2005	and assigned	
	document number L050000	033484			
3.	The delayed effective date (effective Note: If the date inserted in listed as the document's effective date.	this block does not meet t	the applicable statutory filin	ing: 09/30/2019 atte document is received for filing) ag requirements, this date will n	iot be
4.	A description of occurrence 605.0707, Florida Statutes,	e that resulted in the lin (copy 605,0707 on bac	nited liability company's k cover letter).	s dissolution pursuant to sect	tion
	D&A Investments, LLC sold	• • •	,		-
				2019 SEP	· • ']
5.	If there are no members, en	ter the name and addre	ss of the person appoints	-ల సు ed to wind up the company's	• •
	activities and affairs:	Tony J Apicella Jr.	1		<u> </u>
		Robert Cieswick		<u></u>	
s. Iist	Signature of an authorized ped above to wind up the cor	person or if there are no npany's activities and a	o members, the signature affairs:	of the person appointed and	i
	N		Tony J Apicella Jr.	407-252-8815	
	Signature		Print	ed Name	

FILING FEE: \$25.00

TJapicelle Egniloun