

L190000092030

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

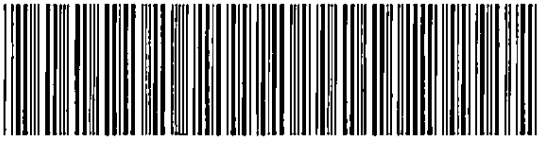
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2019 DEC 16 AM 09
FILED DEC 16 AM 09

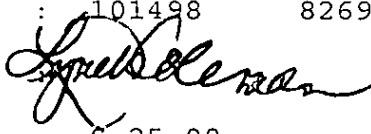
EC 17 2019
C. LEONARD

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 101498 8269367

AUTHORIZATION



COST LIMIT : \$ 25.00

ORDER DATE : December 13, 2019

ORDER TIME : 9:28 AM

ORDER NO. : 101498-005

CUSTOMER NO: 8269367

DOMESTIC FILINGS

NAME: 225 S. LATITUDE CIRCLE LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson - EXT#

EXAMINER'S INITIALS: _____

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

1. The name of a limited liability company is
225 S. LATITUDE CIRCLE LLC

2019 DEC 16 A 11:09
and assigned
CLERK, DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

2. The Articles of Organization were filed on 04/05/2019
document number L19000092030

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).

I decided to use another LLC for this company.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: MARLENA DEMENUS

6511 FRESH MEADOW LN

FLUSHING, NY 11365

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

MARLENA DEMENUS
Printed Name

FILING FEE: \$25.00