L19000296132

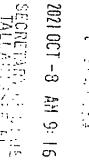
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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COVER LETTER

Registration Section

TO:

Division of Corporations	•	
SUBJECT: DIGITAL HOLIDAY		
SUBJECT: DIGITAL HOLIDAY (Name of Limi	ted Liability Company)	
The enclosed Articles of Dissolution and fee(s) are submi	tted for filing.	
Please return all correspondence concerning this matter to	the following:	
GREGA SI	now of Person)	
(;Na	me of Person)	
NRC CONS	SULTING LLC	
(Fir	m/Company)	
5992 Nu	1 576th Dr. (Address)	
	(Address)	
Cooks	PRINGS FL 33067 ate and Zip Code)	
(City/St	ate and Zip Code)	
For further information concerning this matter, please call	l:	
(Name of Person)	at (954) 592 9877 (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:	Street Address:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liabil	ity company is
Diamar Ho	ournay, LLC
2. The Articles of Organization	n were filed on Dezembert 4, 2019 and assigned
document number <u>L19</u>	000296132
Note: If the date inserted in the	he dissolution if not effective on the date of filing: 10/04/2021 date cannot be prior to or more than 90 days later than date document is received for filing) his block does not meet the applicable statutory filing requirements, this date will not be tive date on the Department of State's records.
605.0707, Florida Statutes, (that resulted in the limited liability company's dissolution pursuant to section copy 605.0707 on back cover letter).
The member	s of the LLC determined that the
	d cease due to not being
<u>CLONOMIC</u>	ally viable
 If there are no members, ent activities and affairs: 	er the name and address of the person appointed to wind up the company's
were the wind withing.	7021 TA
	± 1
	The state of the s
 Signature of an authorized pathove to wind up the company? 	erson or if there are no members, the signature of the person appointed and list
Signature	COULD SNOWD EN
	CONCUPATION CONTRACTOR

FILING FEE: \$25.00