L21000359580

(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:

J. HORNE

SEP 23 2025

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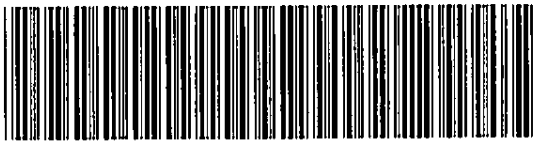

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Account#: I20000000088
If there are any issues please contact Cheyanne at 850-202-1882

Date: 09/22/2025

Name: **Ryan Chasteen**

Reference #: **2904373**

Entity Name: **LMX SERIES LLC**

- ☐ Articles of Incorporation/Authorization to Transact Business
- ☐ Amendment
- ☐ Change of Agent
- ☐ Reinstatement
- ☐ Conversion
- ☐ Merger
- ☑ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☐ Other _____

Authorized Amount: **$35**

Signature: Ryan Chasteen

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Signature: Ryan Chasteen

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LMX Series, 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:

Jay Jackson
(Name of Person)

LMX Series, LLC
(Firm/Company)

2101 Park Center Drive, Suite 170
(Address)

Orlando, FL 32835
(City/State and Zip Code)

For further information concerning this matter, please call:

_____ at (_____) _____
(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 liability company is

   LMX Series, LLC

2. The Articles of Organization were filed on 08/10/2021 and assigned

   document number L21000359580

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).

   Pursuant to Section 605.0701(1), Florida Statutes, the requisite members executed a written consent to dissolve the LLC, effective as of August 31, 2025.

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

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:

   DocuSigned by:
   JAY JACKSON
   8FD1B366FC584F6...
   Signature

   Jay Jackson
   Printed Name

FILING FEE: $25.00