# 105000084670

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(Re	questor's Name)	<del></del>
(Ad	dress)	
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- 1011	(O) 1 FT (O)	<u> </u>
(Cit	y/State/Zip/Phone	<del>?</del> #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(50	Siness Linkly Nai	ne)
(Do	cument Number)	
Certified Copies Certificates of Status		
Special Instructions to	Filing Officer	
Special instructions to	r iiilig Omcer.	
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Office Use Only



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12/14/22--01001--005 \*\*25.00

ALLAHASSEEL FLG.

RECEIVED

2022 DEC 13 AM11: 5

### CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

EXPRESS INDUSTR	JES LLC			
<del> </del>				
	<del></del>			
				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
				Art, of Amend, File
				RA Resignation
				Dissolution / Withdrawal
			<del></del>	Annual Report / Reinstatement
				Cert. Copy
				Photo Copy
				Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
			<u> </u>	Corp Record Search
				Officer Search
				Fictitious Search
Signature	<del></del>	<del></del>	<u> </u>	Fictitious Owner Search
Signature				Vehicle Search
				Driving Record
Requested by:				UCC 1 or 3 File
				UCC 11 Search
Name	Date	Time	]	UCC 11 Retrieval
Walk-In	Will Pick Up			Courier

#### **COVER LETTER**

TO:	Registration Section Division of Corporations					
SUBJE	EXPRESS INDUSTRIES LLC					
00001	(Name of Limited Liability Company)					
	closed Articles of Dissolution and fee(s) are subm					
Please	return all correspondence concerning this matter t	o the following:				
	Jeff Burks					
	(N	ame of Person)				
	Latite Holdings LLC					
	(F	irm/Company)				
	2280 W. Copans Road					
		(Address)				
	Pompano Beach, FL 33069					
	(City/S	state and Zip Code)				
For furt	ther information concerning this matter, please ca	II:				
	Jeff Burks	954 772-3446				
	(Name of Person)	(Area Code & Daytime Telephone Number)				
Enclose	d is a check for the following amount:					
C	\$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	Street Address: Registration Section 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

FILED
2022 DEC 13 AH II: 59

1.	The name of a limited liabil EXPRESS INDUSTRIES LLC			TALL AHASSET. FI
2.	The Articles of Organization	n were filed on $\frac{08/7}{1}$	24/2005	and assigned
	document number L0500008	34670		
3.	The delayed effective date the (effective Note: If the date inserted in the listed as the document's effective date in the listed as the listed a	date cannot be prior to this block does not me	or more than 90 days later tha eet the applicable statutory	filing: 12/15/2022  n date document is received for filing) filing requirements, this date will not be
4.	A description of occurrence 605.0707, Florida Statutes, (o	that resulted in the	limited liability company	y's dissolution pursuant to section
	Consent of all members.			
5.	If there are no members, entactivities and affairs:	er the name and add	dress of the person appoi	nted to wind up the company's
		2280 W. Copans Ro	oad	
		Pompano Beach, FI	_ 33069	
5. ibo	ove to wind up the company'.	s activities and affa	no members, the signati	ure of the person appointed and listed
	7 ( B)	ule	Jeff Burks	
	Signature		Pı	rinted Name

**FILING FEE: \$25.00** 

#### Notice of Limited Liability Company Dissolution

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limite	ed Liability Company:			
Document num	ber of Limited Liability Company is:			<del></del>
Date of dissolu	tion was:			
Description of	information that must be included in a written claim:			
Any claim must	be in writing. All claims must be sent to 2280 W. Copans Road, Pompano Beach FL 330	)69.		
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	<del></del>	35.5	AH III	T
		- [](- 	- = 5	. K
Mailing address	s where claims can be sent: (Claims cannot be sent to the Division of Corporation	15)	ف	
	2280 W. Copans Road			
	Pompano Beach, FL 33069	<del></del>		
		<b></b>		
		_		
		_		
	the above named limited liability company will be barred unless a proceeding to hin 4 years after the filing of this notice.	enforce	the clai	m is
	and the second s			
Jeff Burks		Zuli	/	
	Printed Name of the Person Filing Suprature of the Person	Filing	<del></del>	_

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00