L 17000017658

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COVER LETTER

	eration Section on of Corporations			
A SUBJECT:	ttached LLC Articles of Dissolution			
Nobabet	Liability Company)			
The enclosed A	rticles of Dissolution and fee(s) are submitted	for filing.		
Please return al	l correspondence concerning this matter to the	e following:		
	Sandy Higgins			
(Name of Person)				
Capstone Financial Advisors, Inc.				
(Firm/Company)				
	2001 Butterfield Road, Suite 1750			
(Address)				
	Downers Grove, IL 60515			
(City/State and Zip Code)				
For further information concerning this matter, please call:				
Sandy	Higgins	630 743-2268		
	(Name of Person)	at ()(Area Code & Daytime Telephone Number)		
Enclosed is a che	ck 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)		
For 8 attacl	ned entities	certified copy (additional copy is circlosed)		
Regis Divis P.O. I	g Address: tration Section ion of Corporations Box 6327 nassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		
	The second secon	Tallahassee, FL 32303		

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a 1783 Lauderhill.	imited liability company is LLC
2. The Articles of	Organization were filed on 1/23/2017 and assigned
document num	per <u>L17000017658</u>
Note: If the da	tective date the dissolution if not effective on the date of filing: 1/26/2023 (effective date cannot be prior to or more than 90 days later than date document is received for filing) to inserted in this block does not meet the applicable statutory filing requirements, this date will not be ument's effective date on the Department of State's records.
4. A description of 605.0707, Florid	f occurrence that resulted in the limited liability company's dissolution pursuant to section la Statutes, (copy 605.0707 on back cover letter).
	f LLC property with termination of business activity
5. If there are no ractivities and a	nembers, enter the name and address of the person appointed to wind up the company's fairs: Sandy Higgins
	Capstone Financial Advisors, Inc.
	PO Box 4331
	Lisle, IL 60532
6. Signature of an above to wind up t	authorized person or if there are no members, the signature of the person appointed and listed ne company's activities and affairs:
Sudy	Heggins Sandy Higgins
(/	Signature Printed Name

FILING FEE: \$25.00