Sky H 145 Le City/State/1 Palm B	questor's Name 12h S OAddress Circle Zip Pylone # lach Gardens FL 3348 Office Use Only NAME(S) & DOCUMENT NUMBER(S), (if known):	
2(Corp. 3(Corp.	oration Name) Oration Name) Oration Name) Oration Name) (Document #) Oration Name) (Document #)	
☐ Walk in ☐ Mail out ☐	Pick up time Certified Copy Will wait Photocopy Certificate of Status	
NEW FILINGS	AMENDMENTS	
Profit	Amendment	
NonProfit	Resignation of R.A., Officer/ Director	
Limited Liability	Change of Registered Agent	7
Domestication	Dissolution/Withdrawal	7
Other	Merger Merger Dissolution/Withdrawal ORDING ORDING STATE ORDING ORDING	,
OTHER FILINGS Annual Report Fictitious Name	Dissolution/Withdrawal Merger REGISTRATION/ QUALIFICATION Foreign	
Name Reservation	Limited Partnership	
	Reinstatement	
	Trademark	
	Other	

Examiner's Initials

ARTICLES OF DISSOLUTION FOR A FLORIDA LIMITED LIABILITY COMPANY

1. The name of the limited liability company is	SKY-H16+	15 U	C	
2. The effective date of the limited liability com	pany's dissolution is			—· —.
3. A description of the occurrence that resulted section 608.441, Florida Statutes, (copy	-		tion pursuar	at to
agreed care and the second care				-
. V an a small	home - bases	Z		
business and did	that reed	the	LLC	
business and did title - just a sole	proprietor wh	is re	eded hav.	
 4. CHECK ONE: All debts, obligations and liabilities of the lin-OR- Adequate provision has been made for the defeated. 	nited liability company have	e been paid or	r discharged	
 All remaining property and assets have been respective rights and interests. 		_		
6. CHECK ONE: There are no suits pending against the compara-OR-	ny in any court.			
Adequate provision has been made for the sat be entered against it in any pending suit.	isfaction of any judgment, o	order or decre	ee which ma	у
Signatures of the members having the same per the dissolution:	rcentage of membership in	terests necess	sary to appr	ove
Signature	Typed or Printed name		2 AM	(ED
Jan Hall	Jan Ha	-//	FLORUIT	
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Filing Fee: \$25.00