

LO2 000004204

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

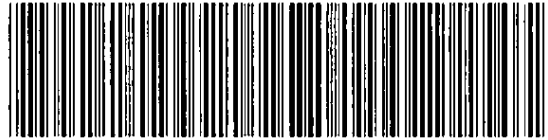
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100417570391

11/17/23--01001--024 **25.00

FILED

2023 NOV 17 AM 11:20

CLERK OF STATE
TALLAHASSEE, FL

RECEIVED

2023 NOV 17 PM 2:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: BROOK 11/17

CERTIFIED COPY

XX PHOTOCOPY

GS

XX FILING

DISSOLUTION

FILED
2023 NOV 17 AM 11:20
TALLAHASSEE, FL

1. **THEISEN ALTAMONTE, LLC**
(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THEISEN ALTAMONTE, 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:

ROBERT SALTSMAN

(Name of Person)

ROBERT P. SALTSMAN, P.A.

(Firm/Company)

P.O. BOX 2146

(Address)

WINTER PARK, FL 32790

(City/State and Zip Code)

2023 NOV 17 AM 11:20
FILED
TALLAHASSEE, FL

For further information concerning this matter, please call:

ROBERT SALTSMAN

407

647-2899

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
THEISEN ALTAMONTE, LLC

2. The Articles of Organization were filed on 02/21/2002 and assigned
document number L02000004204

3. The delayed effective date the dissolution if not effective on the date of filing: 12/31/2023
(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).
ENTITY IS INACTIVE

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

1889 OAK BROOK DRIVE

LONGWOOD, FL 32779

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:



Signature

ROBERT W. THEISEN JR
Printed Name

FILING FEE: \$25.00

2023 NOV 17 AM 11:20
CLERK OF STATE
TALLAHASSEE, FL

FILED