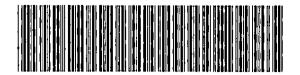
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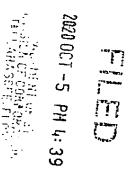
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Sasinos Emily Hame)
(Document Number)
(Document Number)
0.46.4.0
Certified Copies Certificates of Status
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NOV 13 2020 S. YOUN.

COVER LETTER

	gistration Section gision of Corporations	•	
SUBJECT:	Products That Work, LLC (Name of Limi	ted Liability Company)	
Th		10.00	
	d Articles of Dissolution and fee(s) are submi	_	
Please return	all correspondence concerning this matter to	the following:	
	Kenneth A. Horowitz		
CA.	Products That Work, LLC	me of Person)	
	(Fi	m/Company)	
	496 North Lake Way		
		(Address)	
	Palm Beach, Florida 33480		
	(City/St	ate and Zip Code)	
For further in	nformation concerning this matter, please call	:	
Ker	nneth A. Horowitz	561 840 at ()	-9000
	(Name of Person)		vtime Telephone Number)
Enclosed is a c	check for the following amount:		
■ \$ 25.	.00 Filing Fee and Certificate of Dissolution	S55.00 Filing Fee, Cer Centified Copy (addi	iticate of Dissolution & tional copy is enclosed)
Reg	iling Address: gistration Section	Street Address: Registration Section	n
	vision of Corporations	Division of Corpora	itions
	D. Box 6327 lahassee, FL 32314	The Centre of Talla 2415 N. Monroe St	

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	^	
2.	The Articles of Organization were filed on	21/27/2003 and assigned
	document number L03000003040	
3.	The delayed effective date the dissolution if the delayed effective date cannot be prior Note: If the date inserted in this block does not listed as the document's effective date on the Delayer.	to or more than 90 days later than date document is received for filing) meet the applicable statutory filing requirements, this date will not
4.	A description of occurrence that resulted in the 605.0707, Florida Statutes, (copy 605.0707 or	he limited liability company's dissolution pursuant to section n back cover letter).
	Consent of all the members.	,
-		
-		
- i.	If there are no members, enter the name and a	address of the person appointed to wind up the company's
	If there are no members, enter the name and a activities and affairs:	address of the person appointed to wind up the company's
		address of the person appointed to wind up the company's
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		address of the person appointed to wind up the company's
		address of the person appointed to wind up the company's
	activities and affairs:	address of the person appointed to wind up the company's are no members, the signature of the person appointed and listfairs:
	activities and affairs:	
	activities and affairs:	

FILING FEE: \$25.00

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