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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

: CAPITOL SERVICES, INC. Account Name

Account Number: I20160000017 : (855)498-5500

Phone

Fax Number : (800) 432-3622

LLC DISSOLUTION OR WITHDRAWAL SOUTHERN PET CONTAINMENT, L.L.C.

please give or ginal submission ate as file date (11/16/27)

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November 18, 2021

FLORIDA DEPARTMENT OF STATE

SOUTHERN PET CONTAINMENT, L.L.C. Division of Corporations

PO BOX 15678

BROOKSVILLE, FL 34604

SUBJECT: SOUTHERN PET CONTAINMENT, L.L.C.

REF: L03000013107

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FAX Aud. #: H21000424067 Darlene Connell

Letter Number: 921A00027997 Regulatory Specialist II Supervisor

CR2E141 (2/14)

STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida	Statutes, I hereby submit the following State	ment of Termination:
FIRST: The name of the limited liabilit	ly company is:	
SOUTHERN PET CONTAINMENT	T, L.L.C.	
SECOND: The Florida Document num	ber of the limited liability company is: L030	00013107
THIRD: The date of filing of the initial	articles of organization is: 04/10/2003	
FOURTH: The date of filing of the dis	solution is: 11/16/2021	
FIFTH: This limited liability company that it will file a statement of termination	has completed winding up its activities and a n.	ffairs and has determined
Octobra.		entative F
wow	David Ownby, Authorized Repres	entative 2
Signature of Authorized Representative	Typed or printed name of signature	6 1
(T I
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