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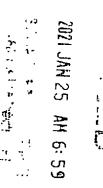
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O SIMMONS
MAR 0 5 2021

## **COVER LETTER**

TO: Registration Section Division of Corporations		r					
SUBJECT: Paul Enterprises, U.C.							
	(Name of Elithed Elao)	my Company)					
The enclosed Articles of Dissolution and fee(s) are submitted for filing.							
Please return all correspondence co	oncerning this matter to the follo	owing:					
	Marc Pau (Name of Per	son)					
Paul Consulting Inc.							
535	5 John Kni (Address)	ox Road					
Tall	chassee, FL (City/State and Z	32303 p Code)					
For further information concerning	this matter, please call:						
Lawa Archa (Name of	lela at	(Area Code & Daytime Telephone Number)					
Enclosed is a check for the following a \$25.00 Filing Fee and Certifi		\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)					
Mailing Address: Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Re ons Dir Th 4 24	eet Address: gistration Section vision of Corporations e Centre of Tallahassee 15 N. Monroe Street, Suite 810 llahassee, FL 32303					

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY



1. The name of a lim	ited liability compa	ty company is			2021 JAN 25 AM 6: 59		
	Paul	Enter	prises, L	10	6. <u>1:</u> . 5:		
2. The Articles of Or	ganization were file	ed on	120 12004		and assigned	•	
document number	L04000	011995					
	tive date the dissolu (effective date cannot nserted in this block d ent's effective date or	loes not meet t	he applicable statute	ory filing re	ocument is receivequirements, the	2020 red for filing) is date will not be	
4. A description of o 605.0707, Florida S	ccurrence that resul- Statutes, (copy 605.	ted in the lim 0707 on back	ited liability comp	oany's diss	solution pursu	ant to section	
	ministration		•				
•	, , , , , , , , , , , , , , , , , , ,	•	,				
					<del></del>	<del></del>	
			<u> </u>				
5. If there are no mer		ne and addres		pointed to	wind up the	company's	
activities and affai	rs: <u>[] []</u>	UC 10	<u> </u>				
	<u>.53</u> .	5 Joh	in Knox	Roa	<u>d</u>		
	Tall	chasse	e, fl 32	303 <u> </u>			
			_	<del>-</del>			
<ol><li>Signature of an aurabove to wind up the</li></ol>	thofized person or i	f there are no	members, the sig	nature of t	he person app	pointed and listed	
M	X		<u> </u>	arc_	Paul		
Sic	mature			Printed	Name		

FILING FEE: \$25.00