10400041765

| (Red | questor's Name) | | |
|---|-------------------|-------------|--|
| (Address) | | | |
| (Address) | | | |
| (City | //State/Zip/Phone | e #) | |
| PICK-UP | ☐ WAIT | MAIL | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies | Certificates | s of Status | |
| Special Instructions to Filing Officer: | | | |
| | | | |
| | | | |
| | | | |

Office Use Only



400292317644

11/21/16--01005--010 **25.00



D. SCOTT HOV 2.2 2016

COVER LETTER

TO:

Registration Section

| Division of Corporations | • | ·. | | |
|--|---|--|--|--|
| SUBJECT: NOTICE ENTE | RPRISE, LLC | | | |
| (Name of Limited Liability Company) | | | | |
| | | | | |
| The enclosed Articles of Dissolution a | and fee(s) are submitted for filing. | | | |
| Please return all correspondence conc | erning this matter to the following: | | | |
| STEPHEN N | OTICE | | | |
| | (Name of Person) | | | |
| NOTICE EN | TERPRISE, LLC | | | |
| (Firm/Company) | | | | |
| 10 TENN LA | NE | 75 16 | | |
| | (Address) | TO B TI | | |
| PALM COAS | ST, FL 32164 | N 21 A | | |
| (City/State and Zip Code) | | | | |
| For further information concerning th | is matter, please call: | OF STATE | | |
| STEPHEN NOTIC | E at (386 | 334-8903 | | |
| (Name of Pe | | & Daytime Telephone Number) | | |
| Enclosed is a check for the following amo | unt: | | | |
| | Siling Fee & S55.00 Filing Fee & Certified Copy (additional copy is e | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) | | |
| MAILING ADI Registration Sectorial Division of Corp P.O. Box 6327 Tallahassee, FL | tion Registra orations Division Clifton | TT/COURIER ADDRESS: ation Section of Corporations Building accutive Center Circle | | |

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. The name of a limited liability company is NOTICE ENTERPRISE, LLC | |
|--|---|
| 2. The Articles of Organization were filed on <u>09/23/2</u> L0400041765 | and assigned document number |
| 3. The date the dissolution was approved: 11/10/20 | 16 |
| 4. A description of occurrence that resulted in the limite 608.441, Florida Statutes, (copy 608.441 on back cov REQUEST FOR DISSOLUTION DU | d liability company's dissolution pursuant to section er letter). |
| FINANCIALLY INSOLVENT. | |
| 5. CHECK ONE: | |
| All debts, obligations and liabilities of the lin | ebts, obligations and liabilities pursuant to s. 608.4421. |
| All remaining property and assets have been distribut rights and interests. | ed among its members in accordance with their respective |
| 7. CHECK ONE: There are no suits pending against the compa | any in any court |
| <u> </u> | tisfaction of any judgment, order or decree which the best be |
| Signatures of the members having the same percentage of r | |
| Signature | Printed Name Control STEPHEN NOTICES 5 |
| Motro | OTENTION & |
| | |
| | |
| | |