## LO6000084577

(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;		
J. HORNE		
MAR 1 / 2022		
MAR 1 / 2022		

Office Use Only



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## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: Liberty Star Plaza (Name of Limi	LLC
/ (Name of Limi	ted Liability Company)
The enclosed Articles of Dissolution and fee(s) are submi	tted for filing.
Please return all correspondence concerning this matter to	the following:
Colisto T- Roden	
Celeste I. Berkey	me of Person)
(E)	חוו/Company)
PO Bex 19	
	(Address)
POBOX 19  East Ellipsy GA 30539 (City/St	
Lasi Ellijay 97 30337 (City/St	ate and Zip Code)
For further information concerning this matter, please call	l:
(2kstl I. Berkey	at ( <u>\$\frac{8\frac{1}{2}}{2}</u> ) <u>\(\frac{414-3097}{2}\)</u> (Area Code & Daytime Telephone Number)
(Name of Verson)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
	☐ \$55,00 Filing Fee, Certificate of Dissolution &
El 325.00 i ming rec and certificate of Dissolution	Certified Copy (additional copy is enclosed)
Maritim Address	Showed Addresses
Mailing Address: Registration Section	Street Address: Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	A LIMITED LIABILITY COMPANY
	The name of a limited liability company is
	Liberty Star Plaza LLC
2.	The Articles of Organization were filed on Aug 25th 2006 and assigned
	document number L060000 84517
3.	The delayed effective date the dissolution if not effective on the date of filing:  (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).
	Business sold
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
	Celeste I Berkey
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:
C	Celeste I. Derkey Printed Name
	FILING FEE: \$25.00