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(((H230003327173)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ALLEY, MAASS, ROGERS & LINDSAY, P.A.

Account Number : 072100000047

: (561)659-1770 Phone

Fax Number : (561)833-2261

LLC DISSOLUTION OR WITHDRAWAL ACH CREW, LLC

	<u> </u>
Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55.00

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COVER LETTER

	Registration Section Division of Corporations		
SUBJEC	ACH CREW, LLC		
SUBJEC		ed Liability Company)	
The enclo	osed Articles of Dissolution and fee(s) are submit	ted for filing.	
Please res	turn all correspondence concerning this matter to	the following:	
	DAVID R. MAASS, ESQ.		
	(Nai	ne of Person)	
	ALLEY, MAASS, ROGERS & LINDSA	AY, P.A.	
	(Fir	nvConipany)	
	340 ROYAL POINCIANA WAY - SUITE 321		
		(Address)	
	PALM BEACH, FLORIDA 33480		
	(City/Su	ate and Zip Code)	
For furth	er information concerning this matter, please call	:	
	DAVID R. MAASS	561 659-1770 at ()	
	(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed	is a check for the following amount:		
	\$25.00 Filling Fee and Certificate of Dissolution	\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)	
	Mailing Address: Degistration Section	Street Address: Registration Section	
Registration Section Division of Corporations		Division of Corporations	
P.O. Box 6327 The		The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

H230003327173

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	Cincontinua	Printed Name	
Dil O D	ı	DAVID R. MAASS	
Signature of a above to wind up	n authorized the compan	person or if there are no members, the signature of the person or if there are no members, the signature of the person of the pe	erson appointed and listed
		PALM BEACH, FLORIDA 33480	
		340 ROYAL POINCIANA WAY - SUITE 321	<u>.</u> 0
If there are no activities and		nter the name and address of the person appointed to wind DAVID R. MAASS	
			· · ·
THE COMPAN	SY IS NO LO	NGER NEEDED.	202
ANY PROPER	TY OR ASSE	TS. THEREFORE, NO DISTRIBUTIONS WERE REQUIRE	D
THE MEMBER	RS CONSENT	ED IN WRITING TO THE DISSOLUTION. THE COMPAN	Y DOES NOT HAVE
4. A description 605.0707, Flor	of occurrencida Statutes.	e that resulted in the limited liability company's dissoluti (copy 605.0707 on back cover letter).	on pursuant to section
		this block does not meet the applicable statutory filing require citive date on the Department of State's records.	ments, this date will not be
	(effectiv	the dissolution if not effective on the date of filing:	nt is received for filing)
document nun	nber 1.080000	003766	
2. The Articles o	of Organizatio	on were filed on and and	assigned
ACH CREW, I		ility company is	·•
 The name of a 	limited liab	ility company is	

FILING FEE: \$25,00