

LOG 0000063619

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

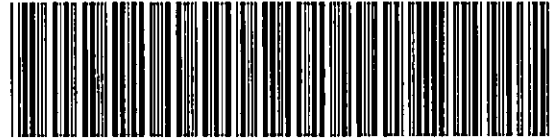
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/04/21--01047--013 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2021 MAY -4 PM 12:07

JUN 18 2021

R. HUNT

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LILLIAN T. NAGLE
* ALSO ADMITTED IN ILLINOIS

May 3, 2021

***Via Federal Express, Overnight Delivery to:
Tracking #7736 1519 8646***

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**Re: CHATILLA, LLC – Document Number L08000063619
Articles of Dissolution for a Limited Liability Company**

Dear Sir or Madam,

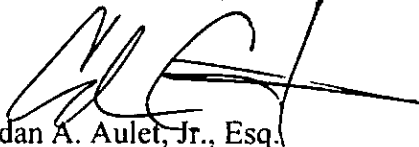
Enclosed for filing please find the following:

1. Articles of Dissolution for a Limited Liability Company;
2. A Notice of Limited Liability Company Dissolution, and
3. A check in the amount of \$25.00, payable to the Florida Department of State, for the filing fees.

Should you have any questions in this regard, please do not hesitate to call my office.

Very Truly Yours,

MACLEAN & EMA, P.A.



Adan A. Aulet, Jr., Esq.

AAA:djs

encls./as noted.

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

CHATILLA, LLC

2. The Articles of Organization were filed on JUNE 30, 2008 and assigned

document number L08000063619

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).

WRITTEN CONSENT OF THE MEMBER.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

Angelica Guckes
Signature

ANGELICA GUCKES, MANAGER

Printed Name

FILING FEE: \$25.00

FILED
IN THE
DEPARTMENT OF STATE
DIVISION OF CORPORATE
REGISTRATION
2008 MAY -14 PM 12:07

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: CHATILLA, LLC

Document number of Limited Liability Company is: L08000063619

Date of dissolution was: _____

Description of information that must be included in a written claim:

All claims must be presented in writing and must contain sufficient information to reasonably inform the

Company of the identity of the claimant (including telephone number and address), the value of the claim,

the substance of the claim, and the date the claim.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

CHATILLA, LLC

c/o MacLean and Ema, P.A.

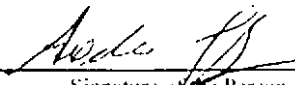
2600 N.E. 14th Street Causeway

Pompano Beach, FL 33062

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

ANGELICA GUCKES, MANAGER

Printed Name of the Person Filing


Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00