## L08 0000 93434

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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2024 DEC 16 PM 3:55

## **COVER LETTER**

TO:

Registration Section

Divis	ion of Corporations				
	RMWZavanna LLC				
SUBJECT: _	(Name of Limited Liability Company)				
The enclosed a	Articles of Dissolution and fee(s) are submitt	led for filing.			
Please return a	all correspondence concerning this matter to	the following:			
	Stanley Heckman				
	(Nan	ne of Person)			
	RMWZavanna LLC				
	(Firm/Company)				
	101 Central Park West, 16C				
	(Address)				
	New York, NY 10023				
	(City/Sta	ite and Zip Code)			
For further in	formation concerning this matter, please call	:			
Stan	ley Heckman	646 at (	207-6983		
	(Name of Person)	(Area Coc	le & Daytime Telephone Number)		
Enclosed is a cl	heck for the following amount:				
☐ \$25.00 Filing Fee and Certificate of Dissolution		\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)			
Mailing Address:		Street Address:			
_	Registration Section		Registration Section Division of Corporations		
	ision of Corporations . 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

۱.	The name of a limited liability company is  RMWZavanna LLC				
2.	The Articles of Organization were filed on September 29, 2008	_ and assigned			
	document number <u>L08000093434</u>				
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.  Note: If the date inserted in this block does not meet the applicable statutory filing listed as the document's effective date on the Department of State's records.				
(	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 505.0707. Florida Statutes, (copy 605.0707 on back cover letter).				
	Sale and disposition of all assets.	2024 DE			
		116 PM			
5	If there are no members, enter the name and address of the person appointed	<u> </u>			
υ,	activities and affairs:				
6. al	Signature of an authorized person or if there are no members, the signature of some signature of signature of the company's activities and affairs:	the person appointed and list			
	Stanley Heckman				
	Signature Printer	l Name			

FILING FEE: \$25.00