

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**L0800103841**

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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  
Phone : (561)659-1770  
Fax Number : (561)833-2261

**LLC DISSOLUTION OR WITHDRAWAL  
ABBRACCI MANAGEMENT LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55.00

2022 APR 13 PM 3:13

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Corporate Filing Menu

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APR 14 2022

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**FILED**

**COVER LETTER**

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**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ABBRACCI MANAGEMENT LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DAVID R. MAASS, ESQ.

(Name of Person)

ALLEY, MAASS, ROGERS & LINDSAY, P.A.

(Firm/Company)

340 ROYAL POINCIANA WAY - SUITE 321

(Address)

PALM BEACH, FLORIDA 33480

(City/State and Zip Code)

For further information concerning this matter, please call:

DAVID R. MAASS

(Name of Person)

561

659-1770

at ( )

(Area Code & Daytime Telephone Number)

Enclosed is a check 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:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

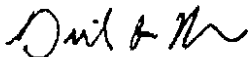
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

1. The name of a limited liability company is  
ABBRACCI MANAGEMENT LLC
2. The Articles of Organization were filed on NOVEMBER 6, 2008 and assigned  
document number L08000103841
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).  
THE MEMBERS CONSENTED IN WRITING TO THE DISSOLUTION. THE COMPANY DOES NOT HAVE  
ANY PROPERTY OR ASSETS, THEREFORE, NO DISTRIBUTIONS WERE REQUIRED.  
THE COMPANY IS NO LONGER NEEDED.
5. If there are no members, enter the name and address of the person appointed to wind up the company:  
activities and affairs: DAVID R. MAASS  
340 ROYAL POINCIANA WAY - SUITE 321  
PALM BEACH, FLORIDA 33480
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:



Signature

DAVID R. MAASS

Printed Name

FILING FEE: \$25.00

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