600020347

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(De	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
	Office Use On	ly

5



08/12/24--01018--010 **25.00



COVER LETTER

TO: **Registration Section Division of Corporations** UL lency SUBJECT: (Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

SG/ VSN (Name of Person) Starfish Title (Firm/Comp Hyln- f-5 vite 313 (Firm/Company) Federal Hny, Siv (Address) Stuart (2) \sim (City/State and Zip Code)

For further information concerning this matter, please call:

486-3226 (Area Code & Daytime Telephone Number)

(Name of Person)

Enclosed is a check for the following amount:

\$25,00 Filing Fee and Certificate of Dissolution

Mailing Address: **Registration Section Division of Corporations** P.O. Box 6327

D \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

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1.	The name of a limited liability company is Sturfish Title Agent, LLC						
2.	The Articles of Organization	were filed on	3/2/00]	and assigne	đ	
	document number $LO^{()}$	10000zc	1347				
3.	The delayed effective date the (effective d <u>Note:</u> If the date inserted in thi listed as the document's effecti	s block does not m	eet the applicab	e statutory filin	$\frac{19}{15}$	his date will not be	
4.	A description of occurrence the 605.0707. Florida Statutes, (co	hat resulted in the opy 605.0707 on 1	back cover lett	er)	Iissolution purs	suant to section	
	too much debt						
5.	If there are no members, enter activities and affairs:	the name and ad $S + w \wedge S$		rson appointee	l to wind up the	company's	
		759 52	fe Jen 1	Hay	Soute	313	
		SWAT	IFL	349	94		
6	Signature of an authorized per	wan ar if there ar	na mamhara	the simulation of	f the parson on		

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:

Sten Sortin Signature Printed Name

FILING FEE: \$25.00

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.

little Startish Name of Limited Liability Company: Document number of Limited Liability Company is:_ 10/15/2020/ Date of dissolution was:

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

frand Church Company to take on Much delt and is no lugar Gible Maintain and is out of business

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

IN CH

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Steven SARICIN 759 SW Federal Highway Suite 313 3469

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.

Stern Salkin

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