

LO9000022153

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

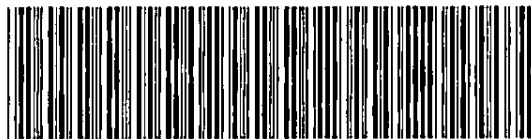
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400402800714

02/17/23--01009--019 \*\*25.00

FILED  
2023 FEB 17 AM 11:19  
SECRETARY OF STATE  
TALLAHASSEE, FL 32309

A. RIVERS  
APR 30 2023

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** STEVEN FELLER P.E., PL. 13250 NW 5th St Plantation, FL 33325  
13250 NW 5th St Plantation, FL 33325  
(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:

Jon D. Derrevere, Esq.

\_\_\_\_\_  
(Name of Person)

Derrevere Stevens Black & Cozad

\_\_\_\_\_  
(Firm/Company)

2005 Vista Parkway, Suite 210

\_\_\_\_\_  
(Address)

West Palm Beach, FL 33411

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Jon Derrevere

561

684-3222

at ( )

\_\_\_\_\_  
(Name of Person)

\_\_\_\_\_  
(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

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

1. The name of a limited liability company is

STEVEN FELLER P.E., PL

2. The Articles of Organization were filed on March 5, 2009 and assigned

document number L09000022153

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 business purpose of the entity is completed and the company is no longer financially viable.

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


12250 NW 5th St

Plantation, FL 33325

2009 FEB 7 AM 11:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

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

Steven Feller

Printed Name

**FILING FEE: \$25.00**