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(Re	equestor's Name)			
(Ad	dress)			
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PICK-UP	MAIT	MAIL		
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(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			





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JAN 2 8 2021 S. YOUNG



COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJECT: Orient Investments, 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:						
Alfred Klopfer						
(Name of Person)						
(Firm/Company)						
1536 Sturbridge Ct						
(Address)						
Dunedin, FL 34698-2260						
(City/State and Zip Code)						
For furt	her information concerning this matter, please call:					
	Alfred Klopfer 727 420-8475					
	(Name of Person) (Area Code & Daytime Telephone Number)					
Enclosed	is a check for the following amount:					

MAILING ADDRESS:

525.00 Filing Fee and Certificate of Dissolution

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The name of a limited lial Orient Investments, LLC	bility company is		
The Articles of Organizat	ion were filed on	010	and assigned
document number L1000	0002933	_	
(effect) Note: If the date inserted i	e the dissolution if not efficiency to the cannot be prior to or menth this block does not meet the cetive date on the Department.	ore than 90 days later than date to applicable statutory filing	ng: e document is received for filing) grequirements, this date will not b
A description of occurren 605.0707, Florida Statutes	ce that resulted in the lim s, (copy 605.0707 on back	ited liability company's cover letter).	dissolution pursuant to section
All underlying property has	· · ·	•	
If there are no members, of activities and affairs:	enter the name and addres Alfred Klopfer	s of the person appointed	I to wind up the company's
	1536 Sturbridge Court		
	Dunedin, FL 34698		
Signature of an authorized	d person or if there are no	members the signature of	of the person appointed and
ted above to wind up the c	ompany's activities and a	ffairs:	or the person appointed and
alph H Kh	y for	Alfred H Klopfer	
/ Signature	,	Printe	d Name 50
	FILING	FEE: \$25.00	26