

L1 00000006719

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

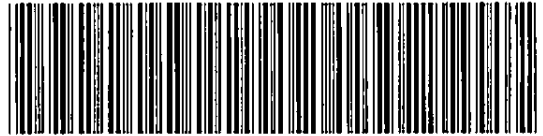
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 JUL 20 PM 4:19
CLERK OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FERN'S ROOMING HOUSE LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

GERALD BRUNET

(Name of Person)

FERN'S ROOMING HOUSE LLC

(Firm/Company)

102 SW STARFISH AVE

(Address)

PORT SAINT LUCIE/FL 34984

(City/State and Zip Code)

For further information concerning this matter, please call:

GRALD BRUNET

(Name of Person)

772

at (_____) _____

8799776

(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

FILED

2023 MAR 20 PM 4:19

CLERK OF STATE
TALLAHASSEE, FL

1. The name of a limited liability company is

FERN'S ROOMING HOUSE, LLC

2. The Articles of Organization were filed on 01/19/2010

and assigned

document number L10000006719

3. The delayed effective date the dissolution if not effective on the date of filing: 03/16/2023

(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).

SOLD BUSINESS

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

102 SW STARFISH AVE

PORT SAINT LUCIE/FL 34984

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

GERALD BRUNET

Printed Name

FILING FEE: \$25.00