(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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RECEIVED

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 08/23/2021	_		₩ALK IN
ENTITY NAME GLC a	rt Co LLC		
DOCUMENT NUMBER			
	PLEASE FILE TH	HE ATTACHED AND RETURN	
XXXXXX	Plaix Copy		
	Certified Copy		
	Certificate of Status		
	Certified Copy of Arts Certificate of Good Sta		
	APOSTILLE' / I	NOTARIAL CERTIFICATION	
COUNTRY OF DESTINA			_ _
NUMBER OF CERTIFICA	ATES REQUESTED	<u></u>	
TOTAL OWED \$25.00)	ACCOUNT #: I2016000007	2
		S. 8 7/10	
Please call Tina at	the above number for	any issues or concerns. Thank you s	o much!

COVER LETTER

	tistration Section ision of Corporations	
SUBJECT:	GLC ART CO LLC	
SUBJECT	(Name of Limit	led Liability Company)
The enclosed	Articles of Dissolution and fec(s) are submit	ted for filing.
Please return	all correspondence concerning this matter to	the following:
	Jacqueline A. Bernu	
	(Nar	ne of Person)
	Fredrikson & Byron, P.A.	
	(Fir	m/Company)
	200 South Sixth Street Suite 4000	
		Address)
	Minneapolis, MN 55402-1425	
	(City/Sta	ate and Zip Code)
For further is	nformation concerning this matter, please call:	
Jac	queline Bernu	612 492-7796
	(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:	STREET/COURIER ADDRESS:
Registration Section		Registration Section
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liab	ility company is	·	
2. The Articles of Organizati	on were filed on $\frac{2/2/2010}{}$	and assigned	
document number L10000	012619	_	
3. The delayed effective date (effective Note: 1f the date inserted in listed as the document's effective delayed. [this block does not meet the	ctive on the date of filing: 8/31/2021 e than 90 days later than date document is received for filing) applicable statutory filing requirements, this date will not be t of State's records.	
4. A description of occurrence 605.0707, Florida Statutes,	e that resulted in the limit (copy 605,0707 on back o	ed liability company's dissolution pursuant to section cover letter).	
Consent of all members to dis	solution of the company.		
		23 - 23	
If there are no members, e activities and affairs:	nter the name and address	of the person appointed to wind up the company's	Ţ
activities and attaits.		FE	-
6. Signature of an authorized listed above to wind up the co	person or if there are no rompany's activities and aff	nembers, the signature of the person appointed and fairs:	
Kaulden	Rundonan	Kathleen N. Baradaran	
Signature	-	Printed Name	

FILING FEE: \$25.00