

L10000031739

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

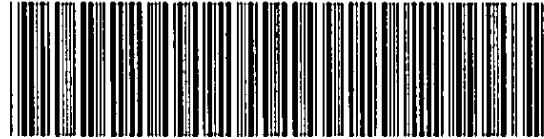
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500399356845

12/28/22--01022--014 **75.00

FILED
2022 DEC 28 PM 12:52
STATE
FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Codina Investment Holdings, 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:

Nancy Hill
(Name of Person)

Codina Partners, LLC
(Firm/Company)

2020 Salzedo Street, 5th FL
(Address)

Coral Gables, FL 33134
(City/State and Zip Code)

For further information concerning this matter, please call:

Nancy Hill at (305) 529-1300
(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

FILED

2022 DEC 28 PM 12: 52

1. The name of a limited liability company is

Codina Investment Holdings, LLC

DEPARTMENT OF STATE
TALLAHASSEE, FL

2. The Articles of Organization were filed on 03/23/2010 and assigned

document number L10000031739

3. The delayed effective date the dissolution if not effective on the date of filing: 12/30/2022
(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).

Company is no longer conducting 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:

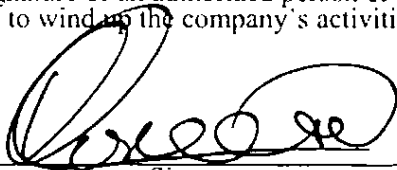
Rafael Romero

C/o Codina Partners, LLC

2020 Salzedo Street, 5th FL

Coral Gables, FL 33134

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

Rafael Romero, Authorized Representative

Printed Name

FILING FEE: \$25.00