

LIC 000063117

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

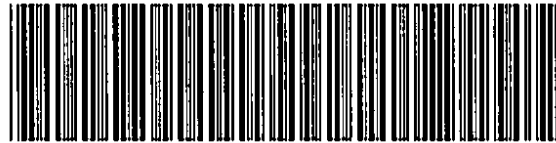
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600356519046

SECRETARY OF STATE
TALLAHASSEE, FL

2020 DEC 21 AM 7:07

FILED

12/21/20--01032--021 **26.00

O SIMMONS
FEB 05 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TO THI PROJECTS 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:

NORA G. CHIRINOS ESQ

(Name of Person)

LAW OFFICES OF NORA G CHIRINOS PLLC

(Firm/Company)

1801 NE 123 STREET SUITE 314

(Address)

MIAMI, FL 33181

(City/State and Zip Code)

For further information concerning this matter, please call:

NORA G. CHIRINOS

(Name of Person)

786

830-3400

at ()

(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

FILED

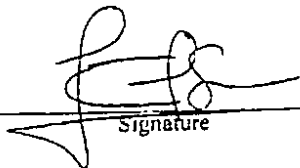
2020 DEC 21 AM 7:07

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY
DEPARTMENT OF STATE
TALLAHASSEE, FL

1. The name of a limited liability company is
TO THI PROJECTS, LLC
2. The Articles of Organization were filed on 06/11/2010 and assigned
document number L10000063117
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 CONSENT OF ALL THE MEMBERS.

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

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

IGNACIO GERSON, MANAGER
Printed Name

FILED

2020 DEC 21 AM 7:07

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: TO THI PROJECTS, LLC

Document number of Limited Liability Company is: L10000063117

Date of dissolution was: 12/15/2020

Description of information that must be included in a written claim:

THE CLAIM MUST BE IN WRITING AND MAILED BY CERTIFIED MAIL OR FEDERAL EXPRESS.

THE CLAIM MUST INCLUDE THE NAME OF THE CLAIMANT, ADDRESS OF THE CLAIMANT, DATE
OF THE EVENT OR OCCURRENCE, AND DOCUMENTARY EVIDENCE OF THE AMOUNT CLAIMED.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

TO THI PROJECTS LLC

2951 TURTLE POND CT

BLOOMFIELD HILLS, MI48302

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

IGNACIO GERSON, MANAGER

Printed Name of the Person Filing


Signature of the Person Filing