## L10000104208

(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.						
J. HORNE APR 27 2024						

Office Use Only



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04/15/24 -01007--008 \*\*55.00



## **COVER LETTER**

TO:	Registration Section Division of Corporations							
SUBJ	11000 Metro LLC ECT:							
(Name of Limited Liability Company)								
The en	nclosed Articles of Dissolution and fee(s) are submit	ted for filing.						
Please return all correspondence concerning this matter to the following:								
	Catherine Hall							
	(Nar	ne of Person)						
	11000 Metro LLC							
	(Firm/Company)							
	2248 Wheeler Road							
		(Address)						
	Lorida, FL 33857							
(City/State and Zip Code)								
For fu	rther information concerning this matter, please call	:						
Catherine Hall		239 633-4917 at ()						
	(Name of Person)	at ()						
Enclose	ed is a check for the following amount:							
ا	□ \$25.00 Filing Fee and Certificate of Dissolution	■ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)						
Mailing Address: Street Address:								
Registration Section		Registration Section						
	Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee						
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810						
		Tallahassee, FL 32303						

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY FILED 2024 APR 15

1. The name of a limited lia	bility company is	**************************************	<sup>5</sup> AM 10: 35		
11000 Metro LLC			<u> </u>		
2. The Articles of Organizat	tion were filed on October 5, 2010		and assigned		
document number L1000	0104208				
Note: If the date inserted in	e the dissolution if not effective o ive date cannot be prior to or more than S in this block does not meet the applic. fective date on the Department of Sta	able statutory filing r	ocument is received for timing)		
I. A description of occurren 605.0707, Florida Statutes	ice that resulted in the limited liab s, (copy 605.0707 on back cover le	ility company's dis etter).	solution pursuant to section		
Business purpose of the LLO	C is complete				
5. If there are no members, activities and affairs:	enter the name and address of the Catherine Hall	person appointed to	o wind up the company's		
activities and arrans.	2248 Wheeler Road, Lorida, Ft. 33857				
			<del></del>		
<ol> <li>Signature of an authorized above to wind up the compare</li> </ol>	d person or if there are no membe ny's activities and affairs:	rs, the signature of	the person appointed and list		
alhern	Hall Cath	erine L. Hall			
Signature		Printed	Name		

FILING FEE: \$25.00

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY FROM

l,	The name of a limited liabili	ty company is	11/5	API 10: 35		
2.	The Articles of Organization	were filed on October 5,	2010	and assigned		
	document number L1000010	4208				
3.	The delayed effective date the (effective Note: If the date inserted in the listed as the document's effect	date cannot be prior to or more his block does not meet the a	than 90 days later than date applicable statutory filing	: N/A document is received for filing) requirements, this date will not be		
4.	A description of occurrence 605.0707, Florida Statutes, (c	that resulted in the limited copy 605.0707 on back co	d liability company's di	ssolution pursuant to section		
	Business purpose of the LLC is	complete				
			<del> </del>			
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:  Catherine Hall					
		2248 Wheeler Road, Lorida, FL 33857				
			•	<del></del> -		
6. ab	Signature of an authorized pove to wind up the company'	erson or if there are no me s activities and affairs:	embers, the signature of	the person appointed and listed		
<i>j</i> :	alhian LL	La 00	Catherine L. Hall			
_	Signature'		Printed	Name		

FILING FEE: \$25.00