

L110000 13144

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

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(Business Entity Name)

(Document Number)

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2020 APR 24 PM 12:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APR 27 2020

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LL Armstrong LLC

**DOCUMENT NUMBER:** L 110000 13144

The enclosed **Notice of Limited Liability Company Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Daniel Armstrong  
(Name of Contact Person)

LL Armstrong  
(Firm/Company)

204 S. Main Ave. #48  
(Address)

Lake Placid, FL 33852  
(City/State and Zip Code)

For further information concerning this matter, please call:

Linda Armstrong at ( 941 ) 323-2938  
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &<br>Certified Copy<br>(Additional copy is enclosed) | <input type="checkbox"/> \$60 Filing Fee,<br>Certificate of Status & Certified<br>Copy (Additional copy<br>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

1. The name of a limited liability company is

LH Armstrong LLC

2. The Articles of Organization were filed on 4-2-20 and assigned

document number L11000013144

3. The delayed effective date the dissolution if not effective on the date of filing: 4-17-20  
(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).

Going out of business - Business

Closing in Sarasota, FL.

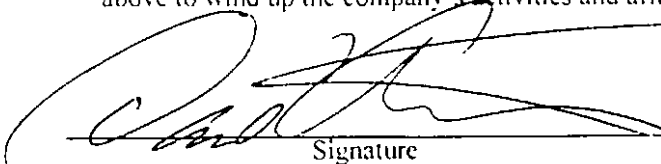
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Daniel Armstrong

204 S. Main Ave # 48

Lake Placid, FL 33852

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

Daniel Armstrong  
Printed Name

FILING FEE: \$25.00

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