L11000031485

(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:						





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04/17/25--01003--010 **25.00

2025 APR 16 AM 8: 22
SECRE AND SEE FL

Chranas

COVER LETTER

TO:

••	istration Section ision of Corporations						
SUBJECT:	MIMOSA INVESTMENTS, LLC						
(Name of Limited Liability Company)							
The enclosed	Articles of Dissolution and fee(s) are submi	tted for filing.					
Please return	all correspondence concerning this matter to	the following:					
	Stephanie Justine						
	(Na:	me of Person)					
	(Fir	rm-Company)					
	5181 SE Meadow Springs Blvd						
	(Address)						
	Stuart, Florida 34997 (City/St	ate and Zip Code)					
For further in	nformation concerning this matter, please call	l:					
Stephanie Justine		772 888-6371					
_	(Name of Person)	(Area Code & Daytime Telephone Number)					
Enclosed is a	cheek 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 Address:					
	gistration Section vision of Corporations	Registration Section Division of Corporations					
P.C	D. Box 6327	The Centre of Tallahassee					
Tal	llahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

2025 APR 16 AM 8: 22

1.	The name of a limited liabil	ity company is		- 34 St 1			
	Mimosa Investments. LLC			SECHELIMY OF STATE			
2.	The Articles of Organization document number L1100003		l	_ and assigned			
3.	The delayed effective date the dissolution if not effective on the date of filing: April 9, 2025 (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 605,0707. Florida Statutes, (that resulted in the limited li copy 605.0707 on back cove	ability company's dis r letter).	ssolution pursuant to section			
	The company is no longer nee						
5.	If there are no members, ent activities and affairs:	er the name and address of the Stephanic Justine	ne person appointed t	o wind up the company's			
		5181 SE Meadow Springs Blvd					
		Stuart, FL 34997					
6. ab	Signature of an authorized pove to wind up the company	erson or if there are no mem's activities and affairs:	bers, the signature of	the person appointed and listed			
	Styrian Mate	St	ephanie Justine				
	1 Sidnature		Printed	Name			

FILING FEE: \$25.00