

L11 0000 89891

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

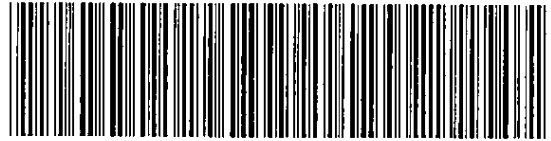
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2024 MAY 29 PM 3:00

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SECRETARY OF STATE
HALLAMSBUILDING

SECRET

CS/13/24

CT CORP
(850) 656-4724
3458 lakesore Drive
Tallahassee, FL 32312

Date: 05/29/2024

Acc#I20160000072

en: c DW

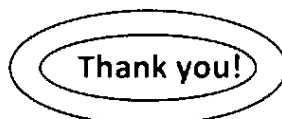
Name:	Perimeter Equity LLC
Document #:	
Order #:	15595536

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input type="checkbox"/>	Email Address for Annual Report Notifications: <div></div>
	Plain: <input checked="" type="checkbox"/>	
	COGS: <input type="checkbox"/>	

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ **25.00**



00:00:00

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
Perimeter Equity LLC
2. The Articles of Organization were filed on August 4, 2011 and assigned
document number L11000089891
3. The delayed effective date the dissolution is 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:

Randi Schnell

Signature

Randi Schnell

Printed Name

FILING FEE: \$25.00