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| (Red | questor's Name) | | | |
|---|-------------------|-----------|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City | //State/Zip/Phone | #) | | |
| PICK-UP | MAIT | MAIL | | |
| (Bus | iness Entity Nam | ne) | | |
| (Document Number) | | | | |
| Certified Copies | Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | | |
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APR 0 5 2021

CORPORATION SERVICE COMPANY 1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

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| Inche. esc ssc 1900 | | | | |
|---|--|--|--|--|
| ACCOUNT NO. : 12000000195 | | | | |
| REFERENCE : 742373 7569733 | | | | |
| AUTHORIZATION | | | | |
| COST LIMIT! : \$ 25.00 | | | | |
| ORDER DATE : April 1, 2021 | | | | |
| ORDER TIME : 11:14 AM | | | | |
| ORDER NO. : 742373-005 | | | | |
| CUSTOMER NO: 7569733 | | | | |
| | | | | |
| DOMESTIC FILINGS | | | | |
| | | | | |
| NAME: AP FAMILY HOLDING, LLC | | | | |
| THE THEFT HOLD INC, DEC | | | | |
| | | | | |
| XX ARTICLES OF DISSOLUTION | | | | |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: | | | | |
| CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING | | | | |
| CONTACT PERSON: Eyliena Baker - EXT# | | | | |

EXAMINER'S INITIALS: _

COVER LETTER

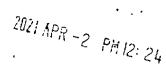
| | ion of Corporations | | | | |
|---|--|---|--|--|--|
| SUBJECT: | AP FAMILY HOLDING, LLC | | | | |
| (Name of Limited Liability Company) | | | | | |
| The enclosed a | Articles of Dissolution and fee(s) are submitted | ed for filing. | | | |
| Please return a | ill correspondence concerning this matter to t | he following: | | | |
| | ERIC DORSCH | | | | |
| | (Name of Person) | | | | |
| | KOZUSKO HARRIS VETTER WAREH DUNCAN LLP | | | | |
| | (Firm Company) | | | | |
| | 575 MADISON AVENUE, FLOOR 24 | | | | |
| | () | Address) | | | |
| | NEW YORK, NEW YORK, 10022 | | | | |
| | (City/State | e and Zip Code) | | | |
| For further info | ormation concerning this matter, please call: | | | | |
| ERIC DORSCH | | 212 405-4770 at () | | | |
| | (Name of Person) | (Area Code & Daytime Telephone Number) | | | |
| Enclosed is a ch | eck 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) | | | |
| | ng Address: | Street Address: | | | |
| | stration Section | | | | |
| | sion of Corporations Box 6327 | Division of Corporations The Centre of Tallahassee | | | |
| Tallahassee, FL 32314 | | 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 | | | |

2021 APR -2 PH 12: 24

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| Note; If the date inserted in this block does not meet the applicable statutory filing requirements, this date we 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 se 605.0707, Florida Statutes, (copy 605.0707 on back cover letter). The sole member consented to the dissolution of AP Family Holding, LLC. The sole member consented to the dissolution of AP Family Holding, LLC. The sole member consented to the dissolution of AP Family Holding, LLC. 5. If there are no members, enter the name and address of the person appointed to wind up the company activities and affairs: 6. Signature of an authorized person or if there are no members, the signature of the person appointed above to wind up the company's activities and affairs: Jeffrey Perlman | 1. | The name of a limited liability company is AP FAMILY HOLDING, LLC |
|---|----------|--|
| 3. The delayed effective date the dissolution if not effective on the date of filing: APRIL 2, 2021 (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 we 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 se 605.0707. Florida Statutes, (copy 605.0707 on back cover letter). The sole member consented to the dissolution of AP Family Holding, LLC. The sole member consented to the dissolution of AP Family Holding, LLC. The sole member consented to the dissolution of AP Family Holding, LLC. 5. If there are no members, enter the name and address of the person appointed to wind up the company activities and affairs: 6. Signature of an authorized person or if there are no members, the signature of the person appointed a above to wind up the company's activities and affairs: 1. Jeffrey Perlman | 2. | The Articles of Organization were filed on AUGUST 15, 2011 and assigned |
| Note: If the date inserted in this block does not meet the applicable statutory filling requirements, this date we 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 se 605.0707. Florida Statutes, (copy 605.0707 on back cover letter). The sole member consented to the dissolution of AP Family Holding, LLC. The sole member consented to the dissolution of AP Family Holding, LLC. The sole member consented to the dissolution of AP Family Holding, LLC. 5. If there are no members, enter the name and address of the person appointed to wind up the company activities and affairs: 6. Signature of an authorized person or if there are no members, the signature of the person appointed a above to wind up the company's activities and affairs: Jeffrey Perlman | | document number L11000093565 |
| The sole member consented to the dissolution of AP Family Holding, LLC. The sole member consented to the dissolution of AP Family Holding, LLC. The sole member consented to the dissolution of AP Family Holding, LLC. The sole member consented to the dissolution of AP Family Holding, LLC. 5. If there are no members, enter the name and address of the person appointed to wind up the company activities and affairs: 6. Signature of an authorized person or if there are no members, the signature of the person appointed above to wind up the company's activities and affairs: Jeffrey Perlman | 3. | Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no |
| The sole member consented to the dissolution of AP Family Holding, LLC. The sole member consented to the dissolution of AP Family Holding, LLC. 5. If there are no members, enter the name and address of the person appointed to wind up the company activities and affairs: 6. Signature of an authorized person or if there are no members, the signature of the person appointed above to wind up the company's activities and affairs: Jeffrey Perlman | 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 sole member consented to the dissolution of AP Family Holding, LLC. 5. If there are no members, enter the name and address of the person appointed to wind up the company activities and affairs: 6. Signature of an authorized person or if there are no members, the signature of the person appointed a above to wind up the company's activities and affairs: Jeffrey Perlman | | The sole member consented to the dissolution of AP Family Holding, L.I.C. |
| 6. Signature of an authorized person or if there are no members, the signature of the person appointed a above to wind up the company's activities and affairs: Jeffrey Perlman | 5. | If there are no members, enter the name and address of the person appointed to wind up the company's |
| above to wind up the company's activities and affairs: Jeffrey Perlman | | activities and affairs: |
| above to wind up the company's activities and affairs: Jeffrey Perlman | | |
| above to wind up the company's activities and affairs: Jeffrey Perlman | | |
| | | |
| | 6. ab | Signature of an authorized person or if there are no members, the signature of the person appointed and li ove to wind up the company's activities and affairs: |
| Signature Printed Name | 6. ab | ove to wind up the company's activities and affairs: |

FILING FEE: \$25.00



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: AP FAMILY HOLDIN | IG, LLC |
|---|------------------------------------|
| Document number of Limited Liability Company is: L1100 | 00093565 |
| Date of dissolution was: APRIL 2, 2021 | |
| Description of information that must be included in a writte | en claim: |
| (1) Name of claimant; (2) Amount of claim; (3) Date payment w | as due; and |
| | |
| | |
| | |
| Mailing address where claims can be sent: (Claims cannot be ERIC DORSCH, c/o KOZUSKO HARRIS VETTER W | • , |
| 575 MADISON AVENUE, FLOOR 24, NEW YORK, 1 | NY 10022 |
| | ······ |
| A claim against the above named limited liability company claim is commenced within 4 years after the filing of this no | |
| In Circus Description | \mathbb{Q}_{a} , () |
| Printed Name of the Person Filing | Signature of the Person Filing |
| Litting Lattic of the Letzon Litting | - offinering of the Letzon Litting |

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00