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(((H220004322773)))



H220004322773ABC\$

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : WESTON CORPORATE ADMINISTRATION, LLC

Account Number : I20090000072

Phone : (954)356-2905

Fax Number : (954)337-8346

LLC DISSOLUTION OR WITHDRAWAL

ORKO474, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu — Corporate Filing Menu

Help

	COV	ER LETTER	(((H22000432	277 3)))	
TO: Reg	gistration Section vision of Corporations				
SUBJECT:	ORKO474, LLC		. •		
John De 1.		nited Liability Comp	any)	······································	 .
	_	-			
The enclosed	d Articles of Dissolution and fee(s) are subm	nitted for filing.	•	•	•
Please return	all correspondence concerning this matter	to the following:		•	
	JÄCQUELINE F. RODRIGUEZ				. •
	(N	ame of Person)			
	WESTON CORPORATE ADMINISTI	RATION LLC	,	٠.	
	(F	irn/Company)		· · · · · · · · · · · · · · · · · · ·	22.02
	777 BRICKEL AVE., SUITE 500-9663	23		· •	
		(Address)		:-	
	MIAMI, FL 33131			•	
	(City/S	itate and Zip Code)			
For further is	nformation concerning this matter, please ca	lle L			
JAC	COUELINE F. RODRIGUEZ	954 at (278-8041		
	(Name of Person)		ode & Daytime Telep	hone Number)	
Enclosed is a	check for the following emount:				
52 5.	.00 Filing Fee and Certificate of Dissolution	S55.00 Filing Certified C	g Fee, Certificate of D Copy (additional copy	issolution & is enclosed)	
Reg Div P.C	iling Address: gistration Section vision of Corporations D. Box 6327 lahassee: FL 32314	The Centre of		e 810	

Tallahassee, FL 32303

(((H22000432277 3)))

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	of a limited liab	ility company	y is		• .
ORKO474.	COBC				 ·
The Articl	es of Organizati	on were filed	on 09/07/2011	and assi	gned
document	number Li1000	102275			
Note: If the	effectiv) he date inserted in	e date cannot be this block doe	prior to or more than 90 day	e date of filing: 01/01/202 is later than date document is statutory filing requirement records.	received for filings
	ion of occurrenc Florida Statutes; PANY CEASE OF		t in the limited liability 07 on back cover letter)	company's dissolution p).	ursuant to section
·					<u> </u>
	·····	- <u></u>	 	·	
					3-2
If there are		ter the name	and address of the person	on appointed to wind up	the company's
	ita arrana.				<u></u>
				· ·	
	1	,			<u></u> -
Signature of wind	of an authorized up the company	person or if the		e signature of the person	
<u></u>	Signature			Printed Name	<u>0N</u>
مر. ٠٠			,	i inited (idine)	

FILING FEE: \$25.00

(((H22000432277 3)))

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

Document number of Limited Liability Company is: L11000102275	
Date of dissolution was: 01/01/2023	
Description of information that must be included in a written claim:	
NAME OF CLIENT	
DATE OF CLAIM/OCCURANCE	
DETAILS OF CLAIM	
BILL FOR AMOUNT OF CLANA IS AND A	**;
A CLAIM, IF ANY	rga 😘 🚾
failing address where claims can be sent: (Claims cannot be sent to the	
failing address where claims can be sent: (Claims cannot be sent to the 19300 W DIXIE HWY SUITE #4	Division of Corporations)
Mailing address where claims can be sent: (Claims cannot be sent to the 19300 W DIXIE HWY SUITE #4 NORTH MIAMI BEACH, FL 33180	Division of Corporations)
failing address where claims can be sent: (Claims cannot be sent to the 19300 W DIXIE HWY SUITE #4 NORTH MIAMI BEACH, FL 33180	Division of Corporations)
failing address where claims can be sent: (Claims cannot be sent to the 19300 W DIXIE HWY SUITE #4 NORTH MIAMI BEACH, FL 33180	Division of Corporations)
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