L12000 100 137

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT

Discovery World Technologies, LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Luiz Miranda (Name of Person) Discovery World Technologies, LLC (Firm/Company) 320 Fern Drive (Address) Sanford, FL 32773

(City/State and Zip Code)

For further information concerning this matter, please call:

Luiz Miranda 407 883-1212

(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check 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:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	FOR A LIMITED LIABILITY COMI	PANY & S
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I. The name of a limited lia	• • •	6
Discovery World Technolo	gies, LLC	
The Articles of Organiza	tion were filed on	PANY and assigned
document number L12000	0100137	
(effect Note: If the date inserted i	e the dissolution if not effective on the da ive date cannot be prior to or more than 90 days lat in this block does not meet the applicable statu fective date on the Department of State's recon	ter than date document is received for filing) utory filing requirements, this date will not be
A description of occurrer 605.0707, Florida Statute	ice that resulted in the limited liability cors, (copy 605.0707 on back cover letter).	mpany's dissolution pursuant to section
Business closes		
i. If there are no members, activities and affairs:	enter the name and address of the person a	appointed to wind up the company's
	320 Fern Drive	
	Sanford, FL 32773	
5. Signature of an authorize	d person or if there are no members, the secondary's activities and affairs:	signature of the person appointed and
wp wiv		
Luiz Miranda	Luiz Miranda	
Signature		Printed Name

FILING FEE: \$25.00