

4/12/22, 1:42 PM

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**L12000132903**

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H22000132903 3)))



H220001329033ABCW

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.  
Account Number : 076077001702  
Phone : (407)841-1200  
Fax Number : (407)423-1831

**LLC DISSOLUTION OR WITHDRAWAL**  
**ELLY MANOV, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

2022 APR 12 PM 2:30

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Corporate Filing Menu

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APPROVED  
AND  
FILED

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## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is  
ELLY MANOV, LLC
2. The Articles of Organization were filed on 12/12/2012 and assigned  
document number L12000155194
3. The delayed effective date the dissolution if 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 sole asset of the LLC was sold and the sole member of the LLC approved the dissolution per the Operating Agreement of the LLC
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: Elly Manov  
5810 Segovia Place, Vero Beach, FL 32966
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:

**Signature**

Elly Manton

Printed Name \_\_\_\_\_

**FILING FEE: \$25.00**

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**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: ELLY MANOV, LLC

Document number of Limited Liability Company is: L12000155194

Date of dissolution was: Filing Date of Dissolution

Description of information that must be included in a written claim:

Name and Address of Claimant, Amount of Claim, Reason for Claim, any evidence of claim owned including any contracts or invoices with the LLC

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

5810 Segovia Place, Vero Beach, FL 32966

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice

Elly Manov

Printed Name of the Person Filing

  
Signature of the Person Filing

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

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