113000022937

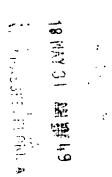
(Re	questor's Name)			
(Address)				
(Address)				
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate:	s of Status		
Special Instructions to Filing Officer:				
	<u>.</u>			

Office Use Only



700313813647

05/31/18--01008--035 **25.00



JUN 01 2018

COVER LETTER

TO:	O: Registration Section Division of Corporations				
SUBJI	ድረ ጥ	6464, LLC			
30134	.,c r		(Name of Limited	Liability Company)	
The en	closed A	rticles of Dissolution and fo	ee(s) are submitted	for filing.	
Please	return all	correspondence concerning	g this matter to the	following:	
		L. M	Michael Osma	n	
(Name of Person)					
		L. N	Michael Osma	n, P.A.	
			(Firm/C	Company)	
	1474-A West 84 Street				
			(Ad	dress)	
		Hial	leah, Florid	a 33014	
			(City/State a	nd Zip Code)	
For fur	ther infor	mation concerning this mat	ter, please call:		
	L. N	lichael Osman		at (305) 823-1401	
	_	(Name of Person)		(Area Code & Daytime Telephone Number)	
Enclose	d is a chec	k for the following amount:			
\$	ДX\$25,00 F	iling Fee and Certificate of D	issolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)	
		MAILING ADDRES	SS:	STREET/COURIER ADDRESS:	
		Registration Section		Registration Section	
		Division of Corporati P.O. Box 6327	ons	Division of Corporations	
		Tallahassee, FL 3231	4	Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is	
6464, LLC	
2. The Articles of Organization were filed on02/13/2013	and assigned
document numberL13000022937	
3. The delayed effective date the dissolution if not effective on the date (effective date cannot be prior to or more than 90 days later to Note: If the date inserted in this block does not meet the applicable statutor listed as the document's effective date on the Department of State's records.	than date document is received for filing) by filing requirements, this date will not be
 A description of occurrence that resulted in the limited liability comp- 605.0707, Florida Statutes, (copy 605.0707 on back cover letter). 	any's dissolution pursuant to section
All of the assets of the company were sold a	nd the proceeds were
distributed to the Members.	
The Company has no active business.	
5. If there are no members, enter the name and address of the person appartivities and affairs:	pointed to wind up the company's
	## ## ## ## ## ## ## ## ## ## ## ## ##
5. Signature of an authorized person or if there are no members, the sign isted above to wind up the company's activities and affairs:	nature of the person appointed and
- MGR L. Michae	حد. <u>Osman</u>
Signature	Printed Name

FILING FEE: \$25.00