

L13000046069

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

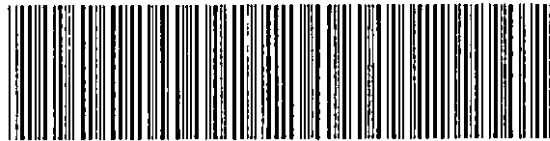
(Business Entity Name)

(Document Number)

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2020 SEP 15 PM 2:13

CLERK'S OFFICE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

2020 Sep 15 PM 1:37

C. GOLDEN

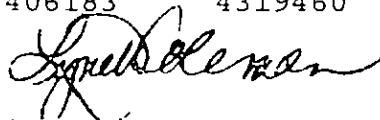
SEP 16 2020

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

ACCOUNT NO. : I20000000195

REFERENCE : 406183 4319460

AUTHORIZATION :



COST LIMIT : \$ 25.00

ORDER DATE : August 31, 2020

ORDER TIME : 10:43 AM

ORDER NO. : 406183-040

CUSTOMER NO: 4319460

DOMESTIC FILINGS

NAME: AP CARRIAGE, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

           CERTIFIED COPY  
XX            PLAIN STAMPED COPY  
           CERTIFICATE OF GOOD STANDING

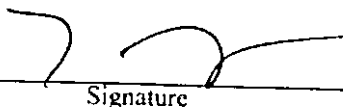
CONTACT PERSON: Amanda Robinson - EXT#

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

7:08 PM 15 PM 1:37

1. The name of a limited liability company is  
AP CARRIAGE, LLC
2. The Articles of Organization were filed on 3/23/2013 and assigned  
document number L13000046069
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).  
Consent of Members  
\_\_\_\_\_  
Consent of Members  
\_\_\_\_\_  
Consent of Members  
\_\_\_\_\_  
\_\_\_\_\_
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: \_\_\_\_\_  
Mark Salzberg  
1155 N. Gulfstream Avenue,  
#1902,  
Sarasota, FL 34236  
\_\_\_\_\_
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

Mark Salzberg, Member

Printed Name

**FILING FEE: \$25.00**