

L130001715

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : ALLEY, MAASS, ROGERS & LINDSAY, P.A. - STUART
Account Number : I20190000118
Phone : (561)659-1770
Fax Number : (561)833-2261

**LLC DISSOLUTION OR WITHDRAWAL
GO DOROTHY LLC**

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$60.00

2024 DEC 12 PM 4:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

RECEIVED

2024 DEC 12 PM 12:31

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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K. SALY

DEC 12 2024

Dec. 12, 2024 11:19AM

No. 9250 P. 2

H24000408985 3

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GO DOROTHY 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:

STUART J. HAFT, ESQ.

(Name of Person)

ALLEY, MAASS, ROGERS & LINDSAY, P.A.

(Firm/Company)

340 ROYAL POINCIANA WAY - SUITE 321

(Address)

PALM BEACH, FLORIDA 33480

(City/State and Zip Code)

For further information concerning this matter, please call:

STUART J. HAFT

(Name of Person)

561

659-1770

at (

(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

H24000408985 3

H24000408985 3

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

FILED
2024 DEC 12 PM 4:48
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
GO DOROTHY LLC

2. The Articles of Organization were filed on DECEMBER 11, 2013 and assigned
document number L13000171715

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 MEMBER CONSENTED IN WRITING TO THE DISSOLUTION. THE COMPANY DOES NOT HAVE

ANY PROPERTY OR ASSETS. THEREFORE, NO DISTRIBUTIONS WERE REQUIRED.

THE COMPANY IS NO LONGER NEEDED.

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: STUART J. HAFT

340 ROYAL POINCIANA WAY - SUITE 321

PALM BEACH, FLORIDA 33480

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

STUART J. HAFT

Printed Name

FILING FEE: \$25.00

H24000408985 3