140000 30047

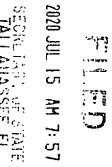
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer;



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07/22/28--01024--028 **25.00

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D. BRUCE AUG 2 7 2020

COVER LETTER

TO: Registration Section Division of Corporations	•
SUBJECT: FLORIDA PREEDOM A	HOMESCHOOL CONSULTING WC
The enclosed Articles of Dissolution and fee(s) are submitted Please return all correspondence concerning this matter to the	
DONNA G	rUNN of Person)
FLORIDA FREEDOM	M HOMESCHOOL CONSULTING LLC
2233 NADACA (N	# 111 tress)
LAND D' LAKES (City State a	FL 34637 nd Zip Code)
For further information concerning this matter, please call:	2020 SECF TAI
DONNA G-UN'N (Name of Person)	at (8/3) 4/6 - 07455 51 (Area Code & Daytime Telephone Number) 57
Enclosed is a check for the following amount: \$25.00 Filing Fee and Certificate of Dissolution	☐ S55.00 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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

l.	The name of a limited liability company is
	FLORIDA FREEDOM HOMESCHOOL CONSULTING LLC
2.	The Articles of Organization were filed on $\frac{2-18-3014}{}$ and assigned
	document number <u>L14000030047</u>
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: It 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). Reguired by new job
	SECR. January
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs: Donna Gann Company Compan
	——————————————————————————————————————
	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:
	Donner M. Gunn Signature DONNA M. GUNN Printed Name
	7 Signature ' Printed Name

FILING FEE: \$25.00