

LI4000 324468

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

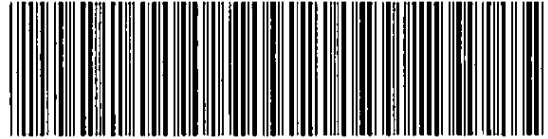
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/30/24--01021--001 **25.00

2024 JAN 30 PM 4:05
RECEIVED
CLERK

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AR ENGINEERING LLC
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fees are submitted for filing.

Please return all correspondence concerning this matter to the following.

NORMAN HAICH
(Name of Person)
PERSONAL REPRESENTATIVE OF THE ESTATE
OF THE DECEDENT AARON M. ALBERT
(Firm/Company)
2515 YULE TREE DR
(Address)
EDGEWATER FL 32141
(City/State and Zip Code)

2021 JAN 30 PM 4:05

For further information concerning this matter, please call

NORMAN HAICH at 386, 527-0442
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount

☒ \$25.00 Filing Fee and Certificate of Dissolution

☐ \$57.00 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

1. The name of a limited liability company is

AR ENGINEERING LLC

2. The Articles of Organization were filed on 2/25/2014 and assigned

document number L14000032465

3. The delayed effective date the dissolution if not effective on the date of filing: 1/27/2024
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

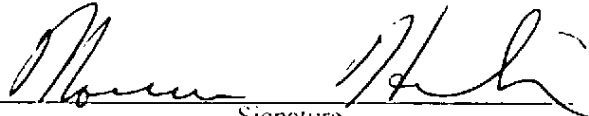
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes. (copy 605.0707 on back cover letter)

INACTIVE DUE TO ILLNESS
AND THEN DEATH

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

NORMAN HAICH

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

Norman Haich
Printed Name

FILING FEE: \$25.00