To: 1 Sunbiz Emenda 6383 ›
1/9/25. 5:00 PM

Page: 1 of 2

2025-01-09 22:06:41 GMT
Division of Corporations

From: Lyslei Chirico

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

L14000068848

Note: **Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H25000011461 3)))

H250000114613ABCU

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From:
        Account Name    : ELO ENTERPRISES, INC
        Account Number  : I20150000109
        Phone           : (561)544-8862
        Fax Number      : (954)697-0130
```

LLC DISSOLUTION OR WITHDRAWAL

SKY MIDIA MIAMI, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	$25.00

Electronic Filing Menu   Corporate Filing Menu   Help

JAN 13 2025

K. Brumbley

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

SKY MIDIA MIAMI, LLC

2. The Articles of Organization were filed on 04/28/2014 _____ and assigned

document number L14000068848

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).

No activities

No activities

No activities

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

activities and affairs: _____

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:

Wallace Martins
_____
Signature

MARTINS, WALLACE - MEMBER
_____
Printed Name