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2024 AUG - 2 PM 4: 32 NGC 2 PM 4: 32

COVER LETTER

. :

Tallahassee, FL 32314

	ation Section on of Corporations	
SUBJECT:	Pobinson Custor	n Wood LLC
	(- 4	a statility company)
The enclosed Ar	ticles of Dissolution and fee(s) are submitte	ed for filing.
Please return all	correspondence concerning this matter to t	he following:
	David (Nam	RObinson e of Person)
	(Firm	/Company)
	10353 Sw	120th Sheet
	Migni F	2 33 17 4° e and Zip Code)
	(City/Stat	e and zip Code)
For further infor	mation concerning this matter, please call:	
I	Name of Person)	at (734) 478 1958 (Area Code & Daytime Telephone Number)
Enclosed is a chec	k for the following amount: Filing Fee and Certificate of Dissolution	\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)
Regist Divisi	z Address: ration Section on of Corporations Box 6327	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

FILED

1.	The name of a limited liability company is 2024 AUG -2 PH 4: 31
	Robinson Custom Wood Good HISTATE
2.	The Articles of Organization were filed on <u>July</u> 29, 2024 and assigned
	document number
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 longer generativn income
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs: David Robinson
	10353 SW 120 m Street
	Miani FL 33176
6. ab	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:
1	a Man Dalaisan
_	Many David Printed Name

FILING FEE: \$25.00

COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registratio Division of	n Section Corporations		
SUBJECT:	Robinson Custon	n Wood LLC d Liability Company)	
	·	, 	
The enclosed Article	es of Dissolution and fee(s) are submitte	ed for filing.	
Please return all cor	respondence concerning this matter to the	ne following:	
	David (Name	RODINSON— c of Person)	
	(Firm.	/Company)	
		• •	
_	<u> </u>	120 Th Sheet	
	W	uures)	
Microl FL 33174 (City/State and Zip Code)			
	(City/State	and Zip Code)	
For further informat	ion concerning this matter, please call:		
Do	(Name of Person)	at (73 (r) 478 1958 (Area Code & Daytime Telephone Number)	
Enclosed is a check for	r the following amount: g Fee and Certificate of Dissolution	\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)	
	on Section of Corporations	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

	ARTICLES OF DIS	SSOLUTION		
	FOR A LIMITED LIABILI		2024 AUG	FIL
			AUE	? ~2 ²
The name of a limited liab		110 · ~ 11		
Kapin	son Custem	COOD CC		25 19
he Articles of Organizati	on were filed on July:	29,2024 ar	nd assigned	
	-565 7921			
Note: If the date inserted in	the dissolution if not effective date cannot be prior to or more this block does not meet the aparticle date on the Department of	han 90 days later than date docu oplicable statutory filing requ		
605.0707, Florida Statutes,	e that resulted in the limited (copy 605.0707 on back cov	ver letter).	•	ion -
				_
If there are no members, e	nter the name and address of	the person appointed to w	vind up the company's	-
activities and affairs:	David Robi	• • •		_
	10355 Su	U 120TM ST	vect	_
	Miani	FL 33176		_
Signature of an authorized ove to wind up the compan	person or if there are no me y's activities and affairs:	mbers, the signature of the	person appointed and	- d listed
J. An	~	Dand Po	binson	
Signature		Printed Na		_

FILING FEE: \$25.00