# LIA 0000 72161

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAII	-
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	<del></del>
Special Instructions to Filing Officer:	
J. HORNE	
AAR 1 / 2022	

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SECRETARY OF STATE
AND ARCSELL FOR

### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Wild About Florida LLC
(Name of Limited Liability Company)
The conducted Amis New Africa and Control on and Control of Contro
The enclosed Articles of Dissolution and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kimila Grimes - Dineen (Name of Person)
(Firm/Company)
H985 Mederia Lane  Estero FL 33928
(Address)
Estero FL 33928
(City/State and Zip Code)
For further information concerning this matter, please call:
Kimila Grimes - Dineenat 239, 218 8153 (Name of Person) (Area Code & Daytime Telephone Number)
(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

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is 250 100 100 100 100 100 100 100 100 100 1
	Wild About Florida 置蓋 I
2.	The Articles of Organization were filed on $05/05/2014$ and assigned document number $L14000072161$
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).  Business Close.d
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:    Kirnila Grimes - Dineen
	Estero FL 33928
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:
<u>K</u>	imila Grimes-Dineen Kimila Grimes-Dineer Signature Printed Name

**FILING FEE: \$25.00**