# Florida Department of State

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : PAGIO'S & ASSOCIATES, LLC

Account Number : 120100000043

Phone

: (305)397-8553

Fax Number

: (305)397-8521

LLC DISSOLUTION OR WITHDRAWAL 4HOPE USA, LLC

OHNE:	PRINTER -6 PH 1: 10	PAR MEN PORATIONS SION OF CURPORIDA SLLAMASSEE, FLORIDA
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Certificate of Status	0
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MAR - 7 2024

### **COVER LETTER**

	gistration Section vision of Corporations				
SUBJECT:	4HOPE USA, LLC				
(Name of Limited Liability Company)					
	d Articles of Dissolution and fee(s) are submi				
Please return	n all correspondence concerning this matter to	the following;			
	MARTINA ALAI				
	(Name of Person)				
	4HOPE USA, LLC				
	(Firm/Compuny)				
	488 NE 18TH STREET				
	(Address)				
	MIAMI, FL 33132				
	(City/Sti	ate and Zip Code)			
For further is	nformation concerning this matter, please call	:			
MARTINA ALAI		+39 339 110 6278 at ( )			
<del></del>	(Name of Person)	at ()(Area Code & Daytime Telephone Number)			
Enclosed is a	check for the following amount:				
\$25	i.00 Filing Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)			
	iling Address:	Street Address:			
	gistration Section vision of Corporations	Registration Section Division of Corporations			
P.0	D. Box 6327	The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The name of a limited liab	ollity company is	4HOPE USA, LLC		
. The Articles of Organizati	on were filed on	06/03/2014	and assigned	
document number	L14000089091			
The delayed effective date (effecti Note: If the date inserted it listed as the document's eff	ve date cannot be prior to n this block does not π	o or more than 90 days later than neet the applicable statutory f	date document is received	for filing) ate will not b
. A description of occurrence 605.0707, Florida Statutes,	ce that resulted in the	e limited liability company back cover letter).	's dissolution pursuan	
COMPANY OUT OF BUSI		······································		<b>202</b> ! აჯ
			) : : : : : : : : : : : : : : : : : : :	2024 HAR
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			ſ	AH 9: 1
If there are no members, e	nter the name and a	ddress of the person appoir	ited to wind up the con	npány's
activities and affairs:		,	•	
Signature of an authorized pove to wind up the compan	person or if there are y's activities and aff	re no members, the signatu fairs:	re of the person appoin	——— nted and liste
<u>्रिक्त कर्ते ।</u> संबद्धिक अंशि (Mar 5, 2024 96:27 GM	T+1 <u>'</u>	MAR	RTINA ALAI	
Signature		Dr.	inted Name	

FILING FEE: \$25.00

### Notice of Limited Liability Company Dissolution

#### NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

e of Limited Liability Company: 4HOPE USA, LLC			
Document number of Limited Liability Company is:	f 14000000001		
Date of dissolution was:	_		
Description of information that must be included in a w	ritten claim;		
DETAILED INFORMATION ABOUT THE FACTS THAT	LEAD TO THE CLAIM. ALSO PROVIDE CLEAR		
CONTACT DETAILS AS NAME, ADDRESS, EMAIL AN	TO PHONE NUMBER TO BE CONTACTED.		
42.44			
Mailing address where claims can be sent: (Claims can	not be sent to the Division of Corporations)		
488 NE 18TH STREET			
MIAMI, FL 33132			
A claim against the above named limited liability comp claim is commenced within 4 years after the filing of the			
MARTINA ALAI	45/1624 451 [Kari 5, 2024 00:27 GMT-4]		
Printed Name of the Person Filing	Signature of the Person Filing		