114000110337

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	·	
Special Instructions to	Filing Officer:	

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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

Robert Gropper LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Loretta Valero-Smith

(Name of Person)

AWS Bookkeeping & Accounting Inc.

(Firm/Company)

2061 NW 2nd Ave Ste 203

(Address)

Boca Raton, FL 33431

(City/State and Zip Code)

For further information concerning this matter, please call:

Loretta Valero-Smith

561

394-0980

(Name of Person)

(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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The name of a limited liabili	ty company is		
Robert Gropper LLC	-		·
The Articles of Organization	were filed on	and assigned	
document number L1400011	0337		
Note: If the date inserted in the	ne dissolution if not effective on the date cannot be prior to or more than 90 days is block does not meet the applicable ive date on the Department of State's 1	statutory filing requirements, this date	filing) will not b
. A description of occurrence 605.0707, Florida Statutes, (o Semi Retired	that resulted in the limited liability copy 605.0707 on back cover letter	company's dissolution pursuant to ').	section
			<u></u>
1 1111			
If there are no members, entractivities and affairs:	er the name and address of the pers	son appointed to wind up the compa	any's
. Signature of an authorized p sted above to wind up the com	erson or if there are no members, to pany's activities and affairs:	he signature of the person appointe	
101			27
HI X/1	Robert G		Ä
Signature		Printed Name	
//	FILING FEE: \$25.0	0	යෙ