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Florida Department of State  
Division of Corporations  
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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**LLC DISSOLUTION OR WITHDRAWAL  
PINK PALACE JACKSONVILLE, LLC**

Certificate of Status	0
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**ARTICLES OF DISSOLUTION  
OF  
PINK PALACE JACKSONVILLE, LLC**

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**ARTICLE I**

The name of this limited liability company is Pink Palace Jacksonville, LLC (the "Company").

**ARTICLE II**

The Articles of Organization of the Company were filed on August 18, 2014 and assigned Document Number L14000129261.

**ARTICLE III**

The dissolution of the Company was authorized by written consent adopted by the sole member and the sole manager of the Company on November 21, 2024, and shall be effective as of the date of filing of these Articles of Dissolution.

**ARTICLE IV**

All debts, obligations, and liabilities of the Company have been paid or discharged, or adequate provisions have been made therefor, pursuant to Section 605.0709, Florida Statutes.

**ARTICLE V**

All remaining property and assets of the Company have been distributed to its sole member in accordance with the governing documents of the Company and the Florida Revised Limited Liability Company Act.

**ARTICLE VI**

There are no suits pending against the Company in any court.

[Continued on next page.]

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Dated this 22<sup>nd</sup> day of November 2024.

PINK PALACE JACKSONVILLE, LLC

By: Dale B. Purcell

Name: Dale B. Purcell

Title: Manager

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**Notice of Limited Liability Company Dissolution**

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.

Name of Limited Liability Company: Pink Palace Jacksonville, LLCDocument number of Limited Liability Company is: 1.14000129261

Date of dissolution was: \_\_\_\_\_

Description of information that must be included in a written claim:

The identity and contact information for the person or entity asserting the claim, a description of the basis for the claim,the date the claim arose, the amount of the claim, and a description of the facts and circumstances underlying the claim.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

David W. Roberts, Esq.Post Office Box 53315Jacksonville, FL 32201

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Dale B. Purcell

Printed Name of the Person Filing

Dale B. Purcell

Signature of the Person Filing

**Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00**

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