L14000191022

(Requestor's Name)
(Address)
(Address)
,
(C) (C) (C) (C) (D)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Octanica copies
Special Instructions to Filing Officer:
J DERRIG
[[] - L [] 2223





000418153090

.1.307 --01011--616 **E.OC

7023 OCT 30 AM 9: 41

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Barth Associate	es, 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	e following:		
DENISE L (Name)	BARTH of Person)		
Boerth Assoc	crates, LLC		
10030 SW 52n	J RJ dress)		
Cainesville f	232608 and Zip Code)		
For further information concerning this matter, please call:			
Donse Boath (Name of Person)	at (S_6_)S_18 - S_965_ (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:			
☐ \$25.00 Filing Fee and Certificate of Dissolution	S55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)		
Mailing Address: Registration Section	Street Address: Registration Section		
Division of Corporations	Division of Corporations		
P.O. 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

And the second

1.	The name of a limited liability company is Barth Associates, UC Barth Associates, UC			
2.	The Articles of Organization were filed on $\frac{12/16/2014}{2014}$ and assigned			
	document number <u>L14000191022</u>			
3.	The delayed effective date the dissolution if not effective on the date of filing: 12 3/2023 (effective date cannot be prior to or more than 90 days later than date document is redeived 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.	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).			
	DAVID L BARTH is decreased and all contracts			
	are now completed.			
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: DENISE L BAZH				
				Cainesville, E 32608
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:			
	DENISE L BARTH Signature DENISE L BARTH Printed Name			

FILING FEE: \$25.00