L15 0000 24155

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FEB 2 3 2022

COVER LETTER

TO:

Registration Section Division of Corporations

63 UFO LLC SUBJECT:					
GODGECT: _	(Name of Limited Liability Company)				
The enclosed A	The enclosed Articles of Dissolution and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:					
	D : D ()				
	Dennis R. Manire				
	(Name of Person)				
	63 UFO LLC				
	(Firm/Company)				
	3448 Trevino Circle				
	(Address)				
	Titusville, FL 32780				
	(City/State and Zip Code)				
For further information concerning this matter, please call:					
Dennis R. Manire		321 385-1130 at ()			
	(Name of Person)	at ()(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)			
Regis Divis P.O.	ng Address: Stration Section Sion of Corporations Box 6327 hassee, 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 lin	nited liability company is	2022 FEB AM 7: 7
63 UFO LLC		SECRETARY OF STATE
	· ·	TALLAHANSEELFI
2. The Articles of O	rganization were filed on February 9, 20	and assigned
document number	L15000024155	
Note: If the date i	tive date the dissolution if not effective (effective date cannot be prior to or more than inserted in this block does not meet the appliant's effective date on the Department of S	190 days later than date document is received for filing) icable statutory filing requirements, this date will not be
4. A description of c 605.0707, Florida	occurrence that resulted in the limited lia Statutes, (copy 605.0707 on back cover	ability company's dissolution pursuant to section letter).
The consent of all n	embers: Dennis R. Manire and Cynthia R.	Manire
	embers: Dennis R. Manire and Cynthia R.	
5. If there are no me	mbers, enter the name and address of th	e person appointed to wind up the company's
activities and affa	irs:	
 Signature of an au above to wind up the 	thorized person or if there are no member company's activities and affairs:	pers, the signature of the person appointed and liste
ennis R	Manino De	nis R. Manire
Si	gnature	Printed Name

FILING FEE: \$25.00