L15000078666

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04/22/24--01031--007 **25.00



COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJE	CLASSIC RENOVATORS LLC				
	(Name of Limited Liability Company)				
The en	aclosed Articles of Dissolution and fee(s) are submi	tted for filing.			
Please	return all correspondence concerning this matter to	o the following:			
	FREDERICK POWELL				
	(Na	me of Person)			
	CLASSIC RENOVATORS LLC				
	(Firm/Company)				
	10433 SW 53RD TERRACE				
	(Address) BUSHNELL, FL 33513				
	(City/St	ate and Zip Code)			
For fu	rther information concerning this matter, please cal	l:			
	FREDERICK POWELL	407 383-0083 at ()			
	(Name of Person)	(Area Code & Daytime Telephone Number)			
Enclose	ed 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:	Street Address:			
	Registration Section	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

1. The name of a limited liability CLASSIC RENOVATORS LLC	· · · · · · · · · · · · · · · · · · ·				
2. The Articles of Organization	were filed on 02/09	/2015	and assign	ed	
document number L15000028	666				
3. The delayed effective date the (effective d Note: If the date inserted in this listed as the document's effective date. Note: 1	ate cannot be prior to or « b lock does not mee	more than 90 days later that the applicable statutory	an date document is recy filing requirements.	eived for filing) this date will not	
4. A description of occurrence the 605,0707, Florida Statutes, (co	hat resulted in the li	mited liability compa ck cover letter).	ny's dissolution pur	suant to scotton	
BUSINESS CLOSED		,		12	
			_		
5. If there are no members, ente activities and affairs:	r the name and add	ess of the person app	ointed to wind up th	ne company's	
6. Signature of an authorized pe above to wind up the company's	rson or if there are activities and affai	no members, the signars:	nture of the person a	appointed and lis	
Flederick	Porrece	FREDERICK PO	WELL		
Signature			Printed Name		

FILING FEE: \$25.00