115000067776

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u> </u>
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
		-

Office Use Only



300309389783

02/26/18--01030--009 **25.00

18 FEB 26 PM 4: 51
SECRETARY OF STATE

K. SALY FEB 2 6 2018

· COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

Anthony Loren Technologies 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:

Anthony Yarand (Name of Person) Anthony Loren Technologies LLC (Firm/Company) 10954 Sheldon Road (Address) Tampa, FL 33626

(City/State and Zip Code)

For further information concerning this matter, please call:

Anthony \	/arand
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.,813

309-3088

(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

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A	ARTICLES OF DISSOLUTION	_
,	FOR IMITED LIABILITY COMPANY	18 FEB 26 PM SECRETARY OF STA ALLAMASSER, FLORE 15 and assigned
		SECON FEB 26 PM
The name of a limited liability co Anthony Loren Technologies LLC	ompany is	TALI AND OF CO
- Timony Boton recimioning to Elize	1 1 . 1 .	"3NFF 37
The Articles of Organization wer	re filed on $April 1+,20$	and assigned
document number L15000067776		
		January 4 0, 2018
(enective date c	ssolution if not effective on the date of f annot be prior to or more than 90 days later than	uate document is received for firing)
	ock does not meet the applicable statutory fil ate on the Department of State's records.	ing requirements, this date will not
Advisor Comment		1. 1 1
A description of occurrence that 605.0707, Florida Statutes, (copy	resulted in the limited liability company 605.0707 on back cover letter).	s dissolution pursuant to section
	^ /	
LLC no	of profita	ble.
······································		
	e name and address of the person appoin	ted to wind up the company's
activities and affairs:		
Signature of an authorized person ted above to wind up the company	n or if there are no members, the signatury's activities and affairs:	re of the person appointed and
H SAN.	Anthony Yarand	
	7	nted Name

FILING FEE: \$25.00