12/18/2019

Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H190003638103)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: KATZ BASKIES LLC Account Name Account Number : I20080000071 Phone : (561)910-5700 Fax Number : (561)910-5701

LLC DISSOLUTION OR WITHDRAWAL

YULES PARTNERS LLC

Certificate of Status	0		2613
Certified Copy	0		030
Page Count	02		
Estimated Charge	\$25.00		æ
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	COVER	R LETTER 4 ***	H19000363810 3			
TO: Regi	stration Section sion of Corporations		Ġ			
	Yules Partners LLC		45			
SUBJECT:	(Name of Limited	d Liability Company)				
	Articles of Dissolution and fee(s) are submitted all correspondence concerning this matter to the					
	Thomas O. Katz					
(Name of Person)						
	Katz Baskies & Wolf PLLC					
	(Firm/Company)					
	3020 North Military Trail Suite 275					
	(Address)					
	Boca Raton, FL 33431					
	(City/Sta	te and Zip Code)				
For further is	nformation concerning this matter, please call:	:				
The	omas O. Katz	561 910-5700				
	(Name of Person)	(Area Code & Daytime T	elephone Number)			
Enclosed is a	check for the following amount:					
- Confirment Property of Pilone Fee			of Dissolution & copy is enclosed)			

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

ì.	The name of a limited liability company is Yules Partners LLC				
2.	The Articles of Organization were filed on	April 27, 2015 and assigned			
	document number L15000073971				
3.	The delayed effective date the dissolution if (effective date cannot be prior). Note: If the date inserted in this block does not listed as the document's effective date on the D	r to or more than 90 days later than date document is reconved to: ining) t meet the applicable statutory filing requirements, this date will not be			
4.	A description of occurrence that resulted in 605.0707, Florida Statutes, (copy 605.0707 c	the limited liability company's dissolution pursuant to section on back cover letter).			
	By consent of all members.				
		. 2018 FAL			
5.	If there are no members, enter the name and	address of the person appointed to wind up the company's			
	activities and affairs:				
		T			
		LON IN			
	,	<u> </u>			
6. al	Signature of an authorized person or if then bove to wind up the company's activities and	e are no members, the signature of the person appointed and listed affairs:			
(Signature Signature	Branch R. Yules Printed Name			
	Signatup	Littled Manne			

FILING FEE: \$25.00