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## **COVER LETTER**

	Registration Section Division of Corporations		
UBJEC	SPI INVESTMENT, LLC		
Unjec		ted Liability Company)	
he enclo	sed Articles of Dissolution and fee(s) are submi	tted for filing.	
lease ret	urn all correspondence concerning this matter to	the following:	
	Victoria Vidre, Esq		
	(Na	me of Person)	
	Law Office of Victoria Vidre		
	(Fir	m/Company)	
	2450 Hollywood Blvd., Suite 100		
		(Address)	
	Hollywood, FL 33020		
	(City/St	ate and Zip Code)	
or furthe	er information concerning this matter, please call	l:	
1	Victoria Vidre	954 923-9360 at ()	
_	(Name of Person)	(Area Code & Daytime Telephone Number)	
nclosed is	s 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 P.O. Box 6327	Division of Corporations 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 company is SPI INVESTMENT, LLC		
2.	The Articles of Organization were filed on July 21, 2015 and assigned		
	document number L15000126247		
3.	The delayed effective date the dissolution if not effective on the date of filing: February 7, 2024  (effective date cannot be prior to or more than 90 days later than date document is received to Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this da listed as the document's effective date on the Department of State's records.	or filing) te will no	ot be
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).	o sectic	) <b>n</b>
	The LLC is not transacting any business, has no accounts or conducting any activities		
		202	
		No. of	•
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5.	If there are no members, enter the name and address of the person appointed to wind up the com-	pany's	,
	activities and affairs:	:	
6. ab	Signature of an authorized person or if there are no members, the signature of the person appoint ove to wind up the company's activities and affairs:	ed and	listed
	My- Izolda Ivano	A	
	Signature Printed Name	VI	•

**FILING FEE: \$25.00**