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I ALBRITTON

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: (Name of Dimited Liability Company)
The enclosed Articles of Dissolution and fee(s) are submitted for tiling.
Please return all correspondence concerning this matter to the following:
Erica Colliss (Name of Person)
1 (Open Story)
Holl Shark Or
Bradinton (Address) (City/State and Zip Code)
(City/state and Zip Code)
For further information concerning this matter, please call: (Name of Person) at (ALL) 914 30 2 (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



July 31, 2019

ERICA COLLINS 4611 SHARK DR BRADENTON, FL 34208

SUBJECT: COPYSTRONG,LLC Ref. Number: L15000137470

We have received your document for COPYSTRONG, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 219A00015706

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The	name of a limited liability company is	
	Corristana CU,	_
	22/11/2017	-
2. The	Articles of Organization were filed on and assigned	
doc	ment number <u>L15000137</u> 470	
No	delayed effective date the dissolution if not effective on the date of filing: (effective date cannot be prior to or more than 90 days later than date document is received for filing. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will red as the document's effective date on the Department of State's records.	
4. A d	scription of occurrence that resulted in the limited liability company's dissolution pursuant to sec	tion
605.	707. Florida Statutes. (copy 605.0707 on back cover letter).	
<u> 1</u>	it in the source	-
G(harshipex Jilarent, The	
<u> </u>	22.5 67 5 62.5 62.5 6.5 6.5 6.5 6.5 6.5 6.5 6.5 6.5 6.5 6	-
<u> </u>	ripary is threat to assome.	-
		-
	re are no members, enter the name and address of the person appointed to wind up the company's	S
acti	ities and affairs:	-
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	<u></u>	_ '
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6. Sign	nture of an authorized person or if there are no members, the signature of the person appointed and ove to wind up the company's activities and affairs:	ď
0		
/ _	E CILICOLLA	
	(na Collins	_
	Signature Printed Name	

FILING FEE: \$25.00