115000189353

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| |
| |
| |

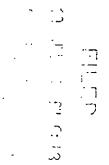
Office Use Only



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07/01/19--01024--024 **25.00

JUL 12 2019 S. YOUNG



COVER LETTER

TO: Registration Section

Division of Corporations

A TO Z AMUSEMENTS OF FLORIDA, 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:

| TERRY WILLIAM | IS |
|---------------|-----------------------|
| | (Name of Person) |
| WILLIAMS, GEE | & COMPANY, PA |
| | (Firm/Company) |
| POST OFFICE B | 3OX 2366 |
| | (Address) |
| COLUMBIA, SC | 29202 |
| (City | v/State and Zin Code) |

For further information concerning this matter, please call:

| TERRY WILLIAMS | _{at} 803 252-2728 |
|------------------|--|
| (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

| 1. The name of a limited liabil | ity company is | | | |
|---|---|--|---|---------------------------|
| A TO Z AMUSEMENTS OF | FLORIDA, LLC | | | |
| 2. The Articles of Organization | n were filed on11/06/ | 2015 | and assigned | |
| document number L1500018 | 39353 | | | |
| 3. The delayed effective date t (effective Note: If the date inserted in the listed as the document's effective date. Comparison of the delayed of the d | date cannot be prior to or n his block does not meet t | nore than 90 days later ti he applicable statutor | han date document is received for v filing requirements, this date | r filing) e will not b |
| 4. A description of occurrence 605.0707, Florida Statutes, (| copy 605.0707 on bac | k cover letter). | - | to section |
| THE COMPANY HAS BEEN | AND CONTINUES TO | BE INACTIVE. NO | BUSINESS IS BEING | |
| CONDUCTED BY THIS COM | IPANY. | | | |
| | | | | |
| | <u></u> | <u> </u> | | : |
| | | | | |
| 5. If there are no members, ent activities and affairs: | er the name and addre | ss of the person app | ointed to wind up the comp | pany's? |
| | - | | | |
| | | | | |
| | | | | |
| | | | _ | |
| 6. Signature of an authorized plisted above to wind up the con | erson or if there are no apany's activities and a | o members, the sign affairs: | ature of the person appoint | ed and |
| halu Tisl | uf | CHARLES BISH | | |
| - arginature | • | | Printed Name | |

FILING FEE: \$25.00