# L1500017017

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(Address)					
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UNDER 14 1019

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 577448 4802598

AUTHORIZATION

COST LIMIT : \$25.00

ORDER DATE: January 11, 2019

ORDER TIME : 1:27 PM

ORDER NO. : 577448-005

CUSTOMER NO: 4802598

## DOMESTIC FILINGS

NAME: PA FLORIDA HOLDINGS, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft - EXT# 62925

EXAMINER'S INITIALS:

#### **COVER LETTER**

TO:

Registration Section Division of Corporations

# PA Florida Holdings, 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:

Rosemary Loverdi				
(Name of Person)				
Dilworth Paxson LLP				
(Firm/Company)				
1500 Market Street, Suite 3500E				
(Address)				
Philadelphia, PA 19102				
(City/State and Zip Code)				

For further information concerning this matter, please call:

Catherine E. Wagner 215 575-7145

(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 liability	ty company is		
	PA Florida Holdings, LLC			
2.	The Articles of Organization document number		and assigned	
3.	(effective of	date cannot be prior to date block does not med	t effective on the date of filing: or more than 90 days later than date document is received for filing) et the applicable statutory filing requirements, this date will no runent of State's records.	ot be
4.	A description of occurrence 605.0707, Florida Statutes, (c) THE CONSENT OF ALL MAN	copy 605.0707 on b	·	on
			5	
			7 - ; - ; - ;	
5.	If there are no members, ento activities and affairs:	Anthony J. Sciole	dress of the person appointed to wind up the company's	1 1
		P. O. Box 957		
		Broomall, PA 1900	8(	
6. li:	Signature of an authorized pattern steel above to wind up the com	erson or if there are	e no members, the signature of the person appointed and affairs:	l
١	LQ 23	$Q_{-}$	Anthony J. Sciole	
	Signature		Printed Name	

**FILING FEE: \$25.00** 

# Notice of Limited Liability Company Dissolution

#### NOTE: This page is optional

Anthony J. Sciole

Printed Name of the Person Filing

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: PA Florida Holdings, LLC					
Document number of Limited Liability Company is: L15000197017					
Date of dissolution was: Date of filing					
Description of information that must be included in a written claim:					
Original invoices	و:				
Signed shipping documents					
Signed receiving documents					
Signed contract	<u>نَّحَةً</u> ابب				
	21/2				
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  PA Florida Holdings, LLC					
P. O. Box 957					
Broomall, PA 19008					
A claim against the above named limited liability company will be barred unless a proceeding to enfociaim is commenced within 4 years after the filing of this notice.	orce th				

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00

Signature of the Person Filing