(shown below) on the top and bottom of all pages of the document.

(((H23000405064 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HARPER MEYER #2

Account Number : 120060000101

Phone : (305)577-3443

Fax Number

: (305)577-9921

LLC DISSOLUTION OR WITHDRAWAL FAF HOUSE LLC

Certificate of Status	0
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T. LEMIEUX NOV 28 2023

ARTICLES OF DISSOLUTION

OF

FAF HOUSE LLC

The undersigned, being a Manager of PAF HOUSE LLC, a Florida limited liability company (the "Company"), desiring to dissolve the Company in accordance with the Florida Revised Limited Liability Company Act, hereby submits the following:

- The name of the Company is FAF HOUSE LLC.
- The Articles of Organization were filed on January 14, 2016, and assigned document number L16000010625.
- 3. The date the dissolution was approved is November 1, 2023.
- 4. The dissolution of the Company was authorized by Written Consent of the Members dated effective November 1, 2023.
- 5. Adequate provision has been made for the debts, obligations, and liabilities pursuant to Florida Statutes Section 605.0710.
- 6. All remaining property and assets have been distributed to the Members.
- 7. There are no suits pending against the Company in any court.

The undersigned Manager, for the purpose of dissolving the Company under the laws of the State of Florida, has executed these Articles of Dissolution effective as of the 27th day of November, 2023.

Fernando Costa Cardeso, Manager

H230004050643

Notice of Limited Liability Company Dissolution

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: FAF HOUSE LLC

Document number of Limited Liability Company is: L16000010625

Date of dissolution was: November 27, 2023

Description of information that must be included in a written claim:

Name and address of claimant and/or attorney of claimant nature of claim, amount in controversy, date of occurrence of incident that gave rise to claim, details of incident, place where claim has been filed, filing number and amount of days given to respond to claim.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

FAF HOUSE LLC c/o Law Center of the Americas, LLC 201 S. Biscayne Boulevard, Suite 800 Miami, FL 33131

A claim against the above-named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

<u>Fernando Costa Cardoso</u>

Printed Name of the Person Filing

Signature of the Person Filing

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