

L1600027496

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : NASON, YEAGER, GERSON, WHITE & LIOCE, P.A.
Account Number : 073222003555
Phone : (561)686-3307
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LLC DISSOLUTION OR WITHDRAWAL
HALOTOPIA, LLC

Certificate of Status	0
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Page Count	02
Estimated Charge	\$25.00

2023 FEB 13 PM 1:59

2023 FEB 13 PM 1:59

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FAN: H23000054953 3

ARTICLES OF DISSOLUTION

OF

HALOTOPIA, LLC

The undersigned, as the Manager of HALOTOPIA, LLC, a Florida limited liability company (the "Company") hereby files these Articles of Dissolution, pursuant to the provisions of Section 605.0707 of the Florida Statutes, as follows:

1. The name of the limited liability company is HALOTOPIA, LLC.
2. The Articles of Organization were filed on February 9, 2016, and assigned document number L16000027496.
3. The effective date for the dissolution of this limited liability company's existence shall be 11:59 p.m. on the date these Articles of Dissolution are filed with the Department of State.
4. The Member, by written consent, elected to dissolve the Company and directed the Manager to execute and deliver these Articles of Dissolution.
5. All debts, obligations, and liabilities of the Company have been paid or discharged.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Dissolution on behalf of the Company this 20th day of January, 2023.

HALOTOPIA, LLC

By: 

Sophia T. Stone, Manager

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FAN: H23000054953 3

FAN: H23000054953 3

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.

Name of Limited Liability Company: HALOTOPIA, LLC

Document number of Limited Liability Company is: L16000027496.

Date of dissolution will be 11:59 p.m. on the date the Articles of Dissolution are filed with the Department of State, as specified in the Articles of Dissolution.

Description of information that must be included in a written claim: name, street and mailing address, phone number and email address of claimant, detailed description of the nature of the claim and the reason for the claim, specific value of the claim, and any supporting documentation regarding the claim.

Mailing address where claims can be sent:

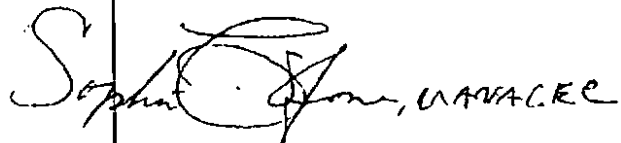
HALOTOPIA, LLC
c/o Nason, Yeager, Gerson Harris & Fumero, P.A.
3001 PGA Boulevard – Suite 305
Palm Beach Gardens, Florida 33410

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.

HALOTOPIA, LLC

By:

Sophia T. Stone, Manager



FAN: H23000054953 3

2023 FEB 13 PM 1:59

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