## 16000050302

(	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: TT Composer Care LLC (Name of Limited Liability Company)		
(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:		
Janet H. Frost		
(Name of Person)		
(Firm/Company)		
Vero Beach FL 32966 (City/State and Zip Code)		
(Address)		
Vero Beach FL 32966		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Janet Frost a. (631, 905-9994		
(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: Street Address:		
Registration Section Registration Section		
Division of Corporations P.O. Box 6327  Division of Corporations The Centre of Tallahassee		
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810		
Tallahassee, FL 32303		

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is  TT Computer Care LLC
2.	The Articles of Organization were filed on $\frac{3/o/2016}{}$ and assigned
	document number <u>L16000050302</u>
3.	The delayed effective date the dissolution if not effective on the date of filing: 4/1/2024  (effective date cannot be prior to or more than 90 days later than date document is received for filing)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
	Over 15 retiring
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
6.	Signature of an authorized person or if there are no members, the signature of the person appointed and listed
ab	ove to wind up the company's activities and affairs:
/	Vand Frost Janet Frost

FILING FEE: \$25.00