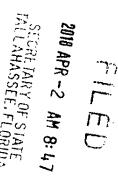


(Re	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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Special Instructions to Filing Officer:				





04/02/18--01048--030 **25.00



COVER LETTER

TO:

Registration Section Division of Corporations

PINNACLE GROUP OF CENTRAL FLORIDA

SUBJECT:

(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:

Sujay Inaganti				
(Name of Person)				
Pinnacle Group of Central Florida LLC				
(Firm/Company)				
7410 Colbury Ave				
(Address)				
Windermere,FL 34786				
(City/State and Zip Code)				

For further information concerning this matter, please call:

Sujay Inaganti	407 2804660	
(Name of Person)	(Area Code & Daytime Telephone Numbe	

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

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Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a lim	nited liability company is			
Pinnacle Group o	f central Floria LLC			
2. The Articles of O	rganization were filed on _	05/20/2016	and assigned	
document number	L16000099043			
Note: If the date i	(effective date cannot be prior	not effective on the date of it to or more than 90 days later than meet the applicable statutory figartment of State's records.	date document is received for	
4. A description of o	occurrence that resulted in t Statutes, (copy 605.0707 o	the limited liability company	's dissolution pursuant to	
sold business to a		ii back cover letter).	Ž.	2018
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			ORID	۲۰ نا
5. If there are no me activities and affa		address of the person appoir	nted to wind up the comp	any's
6. Signature of an au	nthorized person or if there up the company's activities	are no members, the signatus	are of the person appointe	ed and
N	Company sucrivines	o many walkers.		
	May .	SUJAY INAGANTI		
Si	DATE OF THE PARTY	- Pr	inted Name	

FILING FEE: \$25.00