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Division of Corporations

Florida Department of State
Division of Corporations
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L1600009445

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Division of Corporations
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From:

Account Name : SMITH HULSEY & BUSEY
Account Number : 075030000653
Phone : (904)359-7700
Fax Number : (904)359-7708

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2021 DEC 14 PM 2:05

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**LLC DISSOLUTION OR WITHDRAWAL
LUXTEL, LLC**

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

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**ARTICLES OF DISSOLUTION
OF
LUXTEL, LLC**

ARTICLE I

The name of this limited liability company is Luxtel, LLC (the "Company").

ARTICLE II

The Articles of Organization of the Company were filed on May 23, 2016 and assigned Document Number L16000099445.

ARTICLE III

The dissolution of the Company was authorized by written consent adopted by the sole member of the Company on December 14, 2021.

ARTICLE IV

All debts, obligations, and liabilities of the Company have been paid or discharged, or adequate provisions have been made therefor, pursuant to Section 605.0709, Florida Statutes.

ARTICLE V

All remaining property and assets of the Company have been distributed to its sole member in accordance with the governing documents of the Company and the Florida Revised Limited Liability Company Act.

ARTICLE VI

There are no suits pending against the Company in any court.

ARTICLE VII

The effective date of the dissolution of the Company shall be as of the date of filing these Articles of Dissolution.

Dated this 14 day of December, 2021.

LUXTEL, LLC

By: 

Christopher K. Black
Manager

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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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: Luxtel, LLC

Document number of Limited Liability Company is: L16000099445

Date of dissolution was: December/4/2021

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

The identity and contact information for the person or entity asserting the claim, a description of the basis for the claim,
the date the claim arose, the amount of the claim, and a description of the facts and circumstances underlying the claim.

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

Sunoptic Technologies LLC

c/o Manager

6018 Bowdendale Avenue

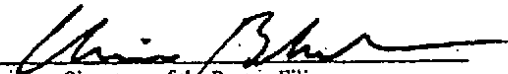
Jacksonville, Florida 32216

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Christopher K. Black

Printed Name of the Person Filing


Signature of the Person Filing

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

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