1/6000122987

(Red	uestor's Name)	
(Add	iress)	
(Add	dress)	
(City	/State/Zip/Phon	ne #)
PICK-UP	MAIT	MAIL
(Bus	siness Entity Na	me)
(Doc	cument Number)
Certified Copies	Certificate	s of Status
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J DENINIS JUL O J 2022



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: I20000000088

Date:June 30, 2022
Name: ASHLYN FREEMAN
Reference #:1696158
Entity Name: CLUB REVENUE SOLUTIONS, LLC
Articles of Incorporation/Authorization to Transact Business
☐ Amendment
☐ Change of Agent
Reinstatement
Conversion
☐ Merger
☑ Dissolution/Withdrawal
☐ Fictitous Name
Other
Authorized Amount: 25.00 Signature: AM JAMAN .

-1.212.947.7200

COVER LETTER

Divisio	on of Corporations					
SUBJECT:	Club Reve	enue Solutions, LLC				
30000001.	(Name of Limit	ed Liability Company)				
	rticles of Dissolution and fee(s) are submitted to the correspondence concerning this matter to	_				
	Char	les Ingram				
	(Nan	ne of Person)				
	Club Revenue Solutions, LLC					
	(Fire	n/Company)				
	512 [E. 16th St.				
	(Address)				
		oga, TN 37408				
	(City/Sta	te and Zip Code)				
For further info	rmation concerning this matter, please call:					
	Charles Ingram	at (<u>239</u>) (Area Code & Dayti	994.8779			
	(Name of Person)	(Area Code & Dayti	me Telephone Number)			
Enclosed is a che-	ck for the following amount:					
\$25.00	Filing Fee and Certificate of Dissolution	S\$5.00 Filing Fee, Certified Copy (addition				
	MAILING ADDRESS:	STREET/CO	DURIER ADDRESS:			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	he name of a limited liability company is CLUB REVENUE SOLUTIONS, LLC			
2.	The Articles of Organization	were filed on	06/27/2016	and assigned
	document number	L16000122987	 -	
3.	The delayed effective date if (effective Note: If the date inserted in it listed as the document's effect	iis block does not meet	t the applicable statutory fili	ling:
4.	A description of occurrence 605.0707, Florida Statutes. (that resulted in the leopy 605,0707 on ba	imited liability company` ick cover letter).	s dissolution pursuant to section
	·	Retiremer	nt of Principals	
5.	If there are no members, enter	er the name and addr	ress of the person appoint	ed to wind up the company's
	activities and affairs:			
5. lis	Signature of an authorized p ted above to wind up the con	erson or if there are appany's activities and	no members, the signatur l affairs:	e of the person appointed and
	/s/Charles Ingra Signature	<u>n</u>		LES INGRAM

FILING FEE: \$25.00