

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet  
**L16000098424**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

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

From:

Account Name : PAGIO'S & ASSOCIATES, LLC  
Account Number : I20100000043  
Phone : (305)397-8553  
Fax Number : (305)397-8521

LLC DISSOLUTION OR WITHDRAWAL  
FIACHNA ENTERPRISES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

RECEIVED

2020 APR -1 PM 2:54

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APR 02 2020

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Corporate Filing Menu

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FIACHNA ENTERPRISES, LLC  
\_\_\_\_\_  
(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:

THOMAS G. NOEL-MORGAN  
\_\_\_\_\_  
(Name of Person)  
  
FIACHNA ENTERPRISES, LLC  
\_\_\_\_\_  
(Firm/Company)  
  
3725 WEST FLAGLER STREET, STE 179  
\_\_\_\_\_  
(Address)  
  
MIAMI, FL 33134  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

THOMAS G. NOEL-MORGAN at (236) 777-1649  
\_\_\_\_\_  
(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:  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address:  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
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  
FIACHNA ENTERPRISES, LLC

2. The Articles of Organization were filed on 07/06/2016 and assigned  
document number L16000124929

3. The delayed effective date the dissolution if not effective on the date of filing: 03/28/2020  
(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).

COMPANY IS GOING OUT OF BUSINESS

COMPANY IS GOING OUT OF BUSINESS

COMPANY IS GOING OUT OF BUSINESS

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  
above to wind up the company's activities and affairs:

Thomas Morgan  
THOMAS G. NOEL-MORGAN (APR 1, 2020)

Signature

THOMAS G. NOEL-MORGAN

Printed Name

**FILING FEE: \$25.00**

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### Notice of Limited Liability Company Dissolution

**NOTE: This page is optional**

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: FIACHNA ENTERPRISES, LLC

Document number of Limited Liability Company is: L16000124929

Date of dissolution was: 12/31/2019

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

BRIEF INFORMATION REGARDING THE FACTS THAT LEAD TO THE CLAIM, INCLUDING DATES,

NAMES, PHONE NUMBER AND ANY ADDRESS NEEDED TO CONTACT THE CLAIMANT.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

3725 WEST FLAGLER STREET, STE 179

MIAMI, FL 33134

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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.

THOMAS G. NOEL-MORGAN

Printed Name of the Person Filing

Thomas Morgan  
Thomas Morgan (pr 1, 2020)

Signature of the Person Filing

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

2020 APR - 1 PM 2:54