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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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R. WHITE. FEB 17 2020

COVER LETTER

.

TO:	Registration Section Division of Corporations	•		
SUBJI	S&T HOUSING LLC ECT:			
(Name of Limited Liability Company)				
The en	closed Articles of Dissolution and fee(s) are submitte	ed for filing.		
Please	return all correspondence concerning this matter to t	he following:		
	RICHARD STARCK			
	(Name	e of Person)		
	(Firm	/Сипралу)		
	479 CORAL CREEK DR			
		Address)		
	PLACIDA, FL 33946 (City/State	e and Zip Code)		
For fu	ther information concerning this matter, please call:			
	RICHARD STARCK	941 662-8311 at ()		
	(Name of Person)	(Area Code & Daytime Telephone Number)		
Enclose	ed 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 Division of Corporations	Registration Section Division of Corporations		
	P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		
	rananassee, ft. 52514	Tallahassee, FL 32303		

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

2020 21 Pt 2:45

1.	The name of a limited liability company is S&T HOUSING LLC
2.	The Articles of Organization were filed on JULY 13, 2016 and assigned
	document number <u>L16000132500</u>
3.	The delayed effective date the dissolution if not effective on the date of filing: FEBRUARY 1, 2 2 26 (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).
	MEMBER'S DECISION TO CLOSE THE BUSINESS
	MEMBER'S DECISION TO CLOSE THE BUSINESS
	MEMBER'S DECISION TO CLOSE THE 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 a	Signature of an authorized person or if there are no members, the signature of the person appointed and listed bove to wind up the company's activities and affairs:
	RICHARD STARCK
	Signature Printed Name

FILING FEE: \$25.00

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:
Document number of Limited Liability Company is:
Date of dissolution was:
Description of information that must be included in a written claim:
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
RICHARD STARCK
479 CORAL CREEK DR
PLACIDA, FL 33946

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.

RICHARD STARCK

Signature of the Person Filing