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D. BRUCE MAY 19 2021

## **COVER LETTER**

Registration Section

TO:

Division of Corporations	
SUBJECT: DAV2 HOLDIN (Name of Limited)	NGS, 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	e following:
DAVID Me	HALD NGS LLC Company)  SEY RO  dress)
ORLANDO (City/State a	F/ 3-803 and Zip Code)
For further information concerning this matter, please call:	ZOZI HAR
DAVID Week, MARY (Name of Person)	at (407 719 - 976) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	المسار المسترار المست
\$25.00 Filing Fee and Certificate of Dissolution	□ \$55.00 Filing Fee. Certificate of Dissolution & [v.]  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

2. The Articles of Organization were filed on	
<ol> <li>The Articles of Organization were filed on</li></ol>	·
<ol> <li>The delayed effective date the dissolution if not effective on the date of filing:</li></ol>	
(effective date the dissolution if not effective on the date of filing:  (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 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).	
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).  CLOSED THE BUSINESS	for filing) date will not be
	nt to section
	<del></del>
	1. 1. 202. i. i.
5. If there are no members, enter the name and address of the person appointed to wind up the company's of activities and affairs:  DAVID WCKINGY SR. 3	mpany's U
<u> </u>	7: 0
6. Signature of an authorized person or if there are no members, the signature of the person appointed and lis above to wind up the company's activities and affairs:	nted and listed
	<i>y</i>
Signature FDAVID UCKINNEY Printed Name	nney x

FILING FEE: \$25.00