

L16000233629

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

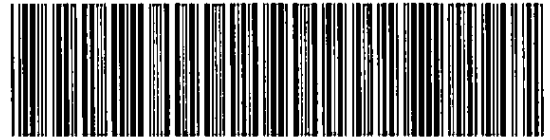
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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MAY 03 2021

05/04/21--01036--005 **25.00

FILED
2021 MAR 30 PM 5:00
TALLAHASSEE, FLORIDA

JC

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WrightChoice Realty of Dobary, 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:

Susan Radosky
(Name of Person)

WrightChoice Realty LLC
(Firm/Company)

116 Traders Cove Blvd
(Address)

Dobary Florida 32713
(City/State and Zip Code)

For further information concerning this matter, please call:

Susan Radosky at (407) 325-4877
(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

WrightChoice Realty of DeBary LLC

2. The Articles of Organization were filed on _____ and assigned

document number LLC 000233638

3. The delayed effective date the dissolution if not effective on the date of filing: May 10 2021
(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).

Retired. Closing Company because
of Health. Reasons. Doctors Suggested
I Retire

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Susan Radesky
116 TRANCORR Cove Blvd
DeBary FL 32713

2021 MAR 30 PM 5:00
TALLAHASSEE, FLORIDA
STATE

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:

Susan W Radesky
Signature

Susan W Radesky
Printed Name

FILING FEE: \$25.00