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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338

Fax Number : (954)208-0845

LLC DISSOLUTION OR WITHDRAWAL EDIBLES 714, LLC

| AND THE PERSON NAMED AND PERSONS ASSESSED FOR PERSONS ASSESSED AND PERSONS ASSESSED. | THE RESIDENCE OF STREET |
|--|-------------------------|
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S. PRATHER

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. The name of a limited lin Edibles 714, LLC | bility company is | |
|--|--|----------------------------------|
| 2. The Articles of Organiza | tion were filed on 01/03/2017 | _ and assigned |
| document number L1700 | 0001061 | |
| (cfluct Note: If the date inserted | e the dissolution if not effective on the date of filing ive date cannot be prior to or more than 90 days later than date in this block does not meet the applicable statutory filing fective date on the Department of State's records. | document is received for liling) |
| 4. A description of occurred 605.0707, Florida Statutes | ce that resulted in the limited liability company's dis, (copy 605.0707 on back cover letter). | issolution pursuant to section |
| Ceased to do business | | |
| | | |
| | | |
| | | 事: <u>P</u> |
| | | <u> </u> |
| | | tion : |
| 5. If there are no members | potes the name and address of the new on unresisted | to wind up the company's |
| 5. If there are no :nembers, enter the name and address of the person appointed to wind up the activities and affairs: Jeff Alexander | | to write up the company s |
| | 980 Hammond Drive, Suite 1000, | |
| | Athenia, GA 30328 | |
| | | |
| 6. Signature of an authorize listed above to wind up the c | f person or if there are no members, the signature of ompany's activities and affairs: | the person appointed and |
| <u> </u> | ······································ | |
| | Turiq Furid, Authorized I | craon |
| Signature | Printed | Name |

FILING FEE: \$25.00