## L170000 102233

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(Address)				
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PICK-UP WAIT MAIL				
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BECRETARY OF STATE
TALLAHASSEE, FI

2024 APR -8 AH 8: 53

## **COVER LETTER**

Registration Section

TO:

Div	ision of Corporations				
SUBJECT:	Margaret Nester LLC				
301471.01.	(Name of Limit	ed Liability Company)			
The enclosed	Articles of Dissolution and fee(s) are submit	ted for filing.			
Please return	all correspondence concerning this matter to	the following:			
	Margaret Nester (Shiffman)				
	(Name of Person)				
Margaret Nester LLC					
(Firm/Company)			SEC SEC		
	8980 NW 80th Avenue		2024 APR		
	(Address)				
	Ocala, Florida 34482		MR 8: 53		
	(City/Sta	te and Zip Code)			
Car freshar in	nformation concerning this matter, please call		:*1 🚥		
ror turther if	normation concerning this matter, please can				
Mai	rgaret Nester Shiffman	352 682-9533 at ()			
	(Name of Person)	(Area Code & Daytime Telep	hone Number)		
Enclosed is a	check for the following amount:				
■ \$25.00 Filing Fee and Certificate of Dissolution		\$55.00 Filing Fee, Certificate of D Certified Copy (additional copy			
Mailing Address: Registration Section		Street Address: Registration Section			
Division of Corporations		Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suit	c 810		
		Tallahassee, FL 32303			

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

۱.	The name of a limited liabili Margaret Nester LLC	ty company is	·
	The Articles of Organization	were filed on January 12, 2017	and assigned
	document number 1.1700001	0233	
	Note: If the date inserted in the	ne dissolution if not effective on the c date cannot be prior to or more than 90 days his block does not meet the applicable sta- tive date on the Department of State's rec	atutory filing requirements, this date will not be
	A description of occurrence 605.0707, Florida Statutes, (	that resulted in the limited liability copy 605.0707 on back cover letter).	ompany's dissolution pursuant to section
	Lam Retired.		2024 APR - SECRETA TALLA
i.	If there are no members, ent	er the name and address of the person	appointed to wind up the company's
	activities and affairs:		
		N/A	
		<del></del>	
ó. ib	Signature of an authorized pove to wind up the company	erson or if there are no members, the s activities and affairs:	signature of the person appointed and liste
1	Margaret Me	ster Margaret No	ester
	Signature	<del></del>	Printed Name

FILING FEE: \$25.00