

**L170000 40939**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

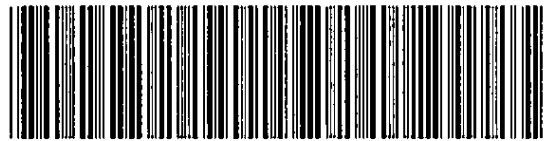
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**FILED**  
**20 JAN 24 AM 11:19**  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

**FEB 18 2020**

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Deepstock Capital 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:

Peter Yanowitch

\_\_\_\_\_  
(Name of Person)

Yanowitch Law

\_\_\_\_\_  
(Firm/Company)

232 Andalusia, Suite 202

\_\_\_\_\_  
(Address)

Coral Gables, FL 33134

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Peter Yanowitch

\_\_\_\_\_  
(Name of Person)

305

443.2100

at (\_\_\_\_\_) \_\_\_\_\_

(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

Deepstock Capital LLC

2. The Articles of Organization were filed on 02/21/2017 and assigned

document number L17000040939

3. The delayed effective date the dissolution if not effective on the date of filing: 3/2/2020  
(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).

consent of all members

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

activities and affairs:

Peter Yanowitch

232 Andalusia, Suite 202

Coral Gables, FL 33146

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:



Signature

Brent Reynolds

Printed Name

**FILING FEE: \$25.00**

20 JUN 24 AM 11:19  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA  
FILED