117000045449

	(Requestor's Name)
	(Address)
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	(City/State/Zip/Phone #)
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PICK-UP	WAIT MAIL
	MIGIC
	(Business Entity Name)
	(Dusiness Citaly Name)
	(Document Number)
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Certified Copies	Certificates of Status
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Special Instructions to	o Hiling Oπicer:
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Office Use Only



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CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 56,67-91,7 4727100

AUTHORIZATION : The alman

COST LIMIT : \$ 25.00

ORDER DATE: March 22, 2022

ORDER TIME : 2:29 PM

ORDER NO. : 566791-005

CUSTOMER NO: 4727100

DOMESTIC FILINGS

NAME: PYTHIS CONSULTING, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland - EXT#

EXAMINER'S INITIALS:

COVER LETTER

Registration Section

TO:

Div	rision of Corporations			
SUBJECT:	Pythia Consulting, LLC			
(Name of Limited Liability Company)				
The encloses	d Articles of Dissolution and fee(s) are submit	ted for filing.		
Please return	n all correspondence concerning this matter to	the following:		
	Kathy Landicho			
	(Na	ne of Person)		
	Offit Kurman, P.A.			
(Firm/Company)				
	8850 Stanford Blvd., Suite 2900			
		(Address)		
	Columbia, MD 21045			
	(City/St:	ate and Zip Code)		
For further is	nformation concerning this matter, please call	:		
Ka	thy Landicho	301 575-0303		
	(Name of Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a	check for the following amount:			
□ \$25	5.00 Filing Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)		
	iling Address:	Street Address:		
	gistration Section vision of Corporations	Registration Section Division of Corporations		
	D. Box 6327	The Centre of Tallahassee		
	Ilahassee, FL 32314	2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303		

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

 The name of a limited liability companion Pythia Consulting, LLC 	y is		
2. The Articles of Organization were filed	d on _02/27/2017 and	assigned	
document number <u>L17000045449</u>			
3. The delayed effective date the dissolution (effective date cannot be Note: If the date inserted in this block do listed as the document's effective date on	be prior to or more than 90 days later than date docume tes not meet the applicable statutory filing require	ent is received for filing) ements, this date will not b)e
4. A description of occurrence that results	ed in the limited liability company's dissolut	ion pursuant to section	
605.0707, Florida Statutes. (copy 605.0	707 on back cover letter).		
		<u>.: </u>	
		7774	
			;
The LLC is dissolved and its activities a	adn affairs are wound up by consent of all me	embers.	
5. If there are no members, enter the name activities and affairs:	e and address of the person appointed to win	d up the company's	
6. Signature of an authorized person or if above to wind up the company's activities	there are no members, the signature of the p and affairs:	erson appointed and list	ed
	Michael Pich		
Signature	Printed Nam	e	

FILING FEE: \$25.00