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(Re	questor's Name)		
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(Address)			
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
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Certified Copies	_ Certificates	s of Status	
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2022 JAN 10 AM 6: 49 SECRETARY OF STATE TALLAHASSEF.F.

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT	LUCKY SHAMROCK EQUINE LLC.				
Sobject.	(Name of Limited Liability Company)				
The enclosed	I Articles of Dissolution and fee(s) are submi	itted for filing.			
Please return	all correspondence concerning this matter to	o the following:			
	Robert Dingle				
	(Name of Person)				
	NA				
	(Firm/Company)				
	1851 Oxford Lane				
	(Address)				
	Lad Lake, FL. 32162				
	(City/St	ate and Zip Code)			
For further in	nformation concerning this matter, please cal.	l:			
Rob	pert Dingle	813 323-3006 at ()			
	(Name of Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a c	theck 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:		Street Address:			
	sistration Section ision of Corporations	Registration Section Division of Corporations			
	. Box 6327	The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			
		Tallahassee, FL 32303			

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

1.	The name of a limited liability company is	2022 JAN 10 AM 6: 49
	Lucky Shamrock Equine , LLC.	SECRETARY OF STATE
2.	The Articles of Organization were filed on 03/15/2017 document number L17000058878	SECRETARY OF STATE TALL AHASSEE, FL and assigned
3.	The delayed effective date the dissolution if not effective on the date (effective date cannot be prior to or more than 90 days late Note: If the date inserted in this block does not meet the applicable state listed as the document's effective date on the Department of State's reco	itory filing requirements, this date will not be
4.	A description of occurrence that resulted in the limited liability con 605.0707, Florida Statutes, (copy 605.0707 on back cover letter). The business has Failed, There be ON INVESTMENT SINCE ZOIT. Soted to END This due to	The INDESTORS
5.	If there are no members, enter the name and address of the person a activities and affairs:	appointed to wind up the company's
6. ab	Signature of an authorized person or if there are no members, the si ove to wind up the company's activities and affairs:	gnature of the person appointed and listed
<u></u>	Fotut Auges Signature Re	Printed Name / NG/e

FILING FEE: \$25.00