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2018 OCT - L PM 4: 53 SEVERE LAKY OF STATE TALL AHASSEE, FL

COVER LETTER

TO:

Registration Section Division of Corporations

SURIFCT

ZINARA HOLDINGS, 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:

Darrin R. Schutt, Esq.

(Name of Person)

Schutt Law Firm, PA

(Firm/Company)

12601 New Brittany Boulevard

(Address)

Fort Myers, Florida 33907

(City/State and Zip Code)

For further information concerning this matter, please call:

Darrin R. Schutt

239

540-7007

(Name of Person)

(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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

2018 OCT -4 PM 4: 53

1.	The name of a limited liabil	lity company is		5010 OC1 -4 FM 4: 23		
	ZINARA HOLDINGS, LLC			SECHETARY OF STATE TALLAHASSEE, FL		
2.	The Articles of Organizatio	n were filed on May	30, 2017	and assigned		
	document number L170001	17006				
3.	The delayed effective date the dissolution if not effective on the date of filing: (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 605.0707, Florida Statutes, (that resulted in the copy 605.0707 on b	limited liability compa- back cover letter).	ny's dissolution pursuant to section		
	All of the Members of the Company approved and consented to the dissolution of the Company, pursuant to					
	Section 605.0707(2), Florida Statutes.					
5.	If there are no members, enactivities and affairs:	ter the name and add	dress of the person appo	inted to wind up the company's		
	detrates and drains.		 			
6. lis	Signature of an authorized pattern above to wind up the cor	person or if there are upany's activities an	e no members, the signand affairs:	ture of the person appointed and		
/	'1 <i></i>	ı				
2/			Werner Stollenme	er, Manager		
	Signature			Printed Name		

FILING FEE: \$25.00