L17000156202

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.
Account Number : 076077001702
Phone : (407)841-1200
Fax Number : (407)423-1831

2023 FEB 24 PM 3:59

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FILED

LLC DISSOLUTION OR WITHDRAWAL
4155 SOUTH ATLANTIC AVENUE 307, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	$25.00

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M. SOLOMON
FEB 27 2023

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

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1. The name of a limited liability company is
   4155 South Atlantic Avenue 307, LLC

2. The Articles of Organization were filed on July 20, 2017 and assigned
   document number L17000156202

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 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 the sole Member.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
   Lisa I. Goldman
   428 Raccoon Street
   Lake Mary, FL. 32746

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:

Lisa I. Goldman
Signature

Lisa I. Goldman
Printed Name

FILING FEE: $25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This **"Notice of Limited Liability Company Dissolution"** is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: 4155 South Atlantic Avenue 307, LLC

Document number of Limited Liability Company is: L17000156202

Date of dissolution was: Upon filing

Description of information that must be included in a written claim:

Name of Claimant:

Address of Claimant:

Amount of Claim:

Basis of Claim:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

428 Raccoon Street

Lake Mary, FL 32746

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Lisa I. Goldman
Printed Name of the Person Filing

Lisa Goldman
Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately $25.00

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