## 117000234683

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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: BOSS Avication (Name of Limited)	I Liability Company)
The enclosed Articles of Dissolution and fee(s) are submitte	d for filing.
Please return all correspondence concerning this matter to the	ne following:
Noah Boss	of Person)
(Firm/	(Company)
5398 SW Anhin	190 AVE
Palm City (City/State	FZ 34990 and Zip Code)
For further information concerning this matter, please call:	
Noa M Boss (Name of Person)	at ( 772 ) (600 - 5083 (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	Street Address: Registration Section
Division of Corporations	Division of Corporations The Centre of Tallahassee
P.O. Box 6327 Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

2. The Articles of Organization were filed on 11/3/17 and assigned document number 17000234683  3. The delayed effective date the dissolution if not effective on the date of filing: 16/20 (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 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 sec 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).  Change of Career  5. If there are no members, enter the name and address of the person appointed to wind up the company activities and affairs:	1. The name of a limited liability 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	viation LLC
3. The delayed effective date the dissolution if not effective on the date of filing: 1/6/20 (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 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 sec 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).  Change of Career  5. If there are no members, enter the name and address of the person appointed to wind up the company activities and affairs:	2. The Articles of Organization w	ere filed onand assigned
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TALL ALL STATE  5. If there are no members, enter the name and address of the person appointed to wind up their company activities and affairs:	<u>Change</u>	of career
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activities and affairs:		
ATE 34	5. If there are no members, enter	the name and address of the person appointed to wind up the company's
6. Signature of an authorized person or if there are no members, the signature of the person appointed an above to wind up the company's activities and affairs:	activities and affairs:	<u> </u>
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	<ol> <li>Signature of an authorized pers above to wind up the company's a</li> </ol>	son or if there are no members, the signature of the person appointed and list ctivities and affairs:
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FILING FEE: \$25.00