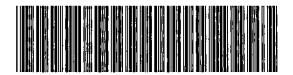
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(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	
· (Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
· (Bu	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



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N. CAUSSEAUX MAR 16 2018

COVER LETTER

TO:

Registration Section Division of Corporations

Pay Less Realty, LLC

BUBJECT: 📥

7

(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:

Michael Berardi	
(Name of Person)	
(Firm/Company)	
480 Seven Bridge Road	
(Address)	
East Stroudsburg, PA 18301	

(City/State and Zip Code)

For further information concerning this matter, please call:

Regina ODonnell

_{..}570 \ 420-9801

(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

1. The name of a limited liabi Pay Less Realty, LLC	lity company is	
2. The Articles of Organization	on were filed on November 17,2017	and assigned
document number L170002		•
(effective Note: If the date inserted in	the dissolution if not effective on the date of filic date cannot be prior to or more than 90 days later than dathis block does not meet the applicable statutory filing tive date on the Department of State's records.	te document is received for filing)
605.0707, Florida Statutes,	e that resulted in the limited liability company's (copy 605.0707 on back cover letter).	dissolution pursuant to section
Do not need this company any	more.	
5. If there are no members, en activities and affairs:	ter the name and address of the person appointe Michael Berardi	d to wind up the company's
	480 Seven Bridge Road	
	East Stroudsburg, PA 18301	
6. Signature of an authorized listed above to wind up the con	person or if there are no members, the signature inpany's activities and affairs: Michael Print	of the person appointed and Berardi ed Name
/	FILING FEE: \$25.00	