

L17 000 255 861

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

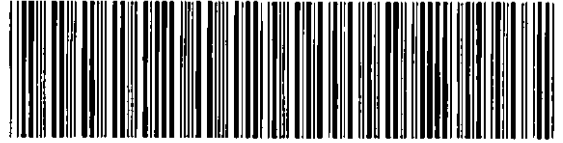
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2024 SEP 24 PM 11:02
SECRETARY OF STATE
TALLAHASSEE, FL

2024 SEP 24 PM 11:23
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED

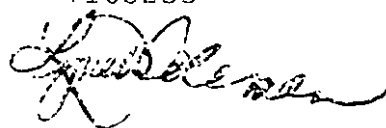
CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 653637 7165233

AUTHORIZATION :

COST LIMIT : \$ 25.0



ORDER DATE : September 20, 2024

ORDER TIME : 9:45 AM

ORDER NO. : 653637-005

CUSTOMER NO: 7165233

2024 SEP 24 AM 11:04
SECRETARY OF STATE
TALLAHASSEE, FL 32301

DOMESTIC FILINGS

NAME: LAP U.S., LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Shauna Godbolt - EXT#

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LAP U.S., 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:

(Name of Person)

(Firm/Company)

(Address)

(City/State and Zip Code)

For further information concerning this matter, please call:

Peter Flagel, Esq.

212 6132091

at ()

(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2024 SEP 24 PM 11:04
SECRETARY OF STATE
TALLAHASSEE, FL

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
LAP U.S., LLC

2. The Articles of Organization were filed on December 14, 2017 and assigned
document number L17000255861

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).

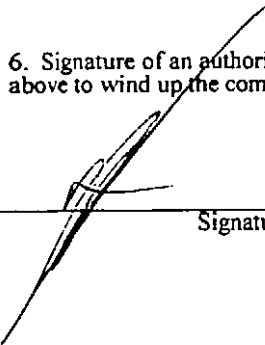
Section 605.0701(2) The consent of all the members.

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Section 605.0701(2) The consent of all the members.

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: _____

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:



Signature

Jens Gauthier (Chief Executive Officer)

Printed Name

FILING FEE: \$25.00

2024 SEP 24 AM 11:04
SECRETARY OF STATE
TALLAHASSEE, FL