## L17000211915

| (Requestor's Name)                      |
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| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| (Only) States Elph Hone II)             |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
|   |
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## **COVER LETTER**

| TO:        | Registration Section Division of Corporations          |   |  |  |  |  |
|------------|--|---|--|--|--|--|
| SUBJE      | SHU Management, LLC                                    |   |  |  |  |  |
| , C D 0 1. | (Name of Limited Liability Company)                    |   |  |  |  |  |
|            | closed Articles of Dissolution and fee(s) are submitte | · ·   |  |  |  |  |
| lease i    | return all correspondence concerning this matter to t  | he following:   |  |  |  |  |
|            | Michael Kuzminsky                                      |   |  |  |  |  |
|            | (Name of Person)                                       |   |  |  |  |  |
|            | Southern Hospitality Unlimited, LLC                    |   |  |  |  |  |
|            | (Firm/Company)   |   |  |  |  |  |
|            | 6100 Lake Forrest Drive, Suite 130                     |   |  |  |  |  |
|            | (Address)  |   |  |  |  |  |
|            | Atlanta, GA 30328                                      |   |  |  |  |  |
|            | (City/Stat   | e and Zip Code)   |  |  |  |  |
| or furt    | ther information concerning this matter, please call:  |   |  |  |  |  |
|            | Lynn Greene  | 678 884-0008  |  |  |  |  |
|            | (Name of Person)                                       | at () (Area Code & Daytime Telephone Number)  |  |  |  |  |
| Enclose    | d 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:                                       | Street Address:   |  |  |  |  |
|            | Registration Section Division of Corporations          | Registration Section Division of Corporations   |  |  |  |  |
|            | P.O. Box 6327  | The Centre of Tallahassee   |  |  |  |  |
|            | Tallahassee, FL 32314                                  | 2415 N. Monroe Street, Suite 810<br>Tallahassee, FL 32303                                       |  |  |  |  |

## 2024 LCC 27 PHT: 20

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| ì.       | The name of a limited liabil SHU Management, LLC   | ity company is                                     |                          |                         |                    |  |  |
|----------|--|--|--------------------------|-------------------------|--------------------|--|--|
| 2.       | The Articles of Organizatio  | n were filed on Decem                              | ber 26, 2017             | and assigned            |                    |  |  |
|          | document number L170002  | 51915  |                          |                         |                    |  |  |
| 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.<br>6  | A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 05.0707. Florida Statutes. (copy 605.0707 on back cover letter).  |  |                          |                         |                    |  |  |
|          | No longer operating  |  |                          |                         | -                  |  |  |
|          | No longer operating  |  |                          |                         | <del></del>        |  |  |
| 5.       | If there are no members, en  | ter the name and addre                             | ess of the person appoir | nted to wind up the con | npany's            |  |  |
|          | activities and affairs:  | Michael Kuzminsky                                  |                          |                         |                    |  |  |
|          |  | 6100 Lake Forrest Drive, Suite 130                 |                          |                         |                    |  |  |
|          |  | Atlanta, GA 30328                                  |                          |                         |                    |  |  |
| ś.<br>ab | Signature of an authorized pove to wind up the company   | person or if there are ne's activities and affairs | o members, the signatus: | re of the person appoin | <br>nted and liste |  |  |
| 4        | if the   | 17   | Michael Kuzminsky        | /<br>rinted Name        |                    |  |  |
|          | Signature  |  | Pr                       | mied Name               |                    |  |  |

FILING FEE: \$25.00