

# L18000010707

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

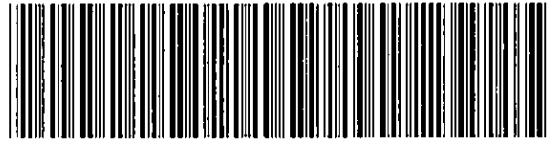
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2023 FEB 23 AM 10:45  
CLERK OF STATE  
TALLAHASSEE, FL  
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2023 FEB 23 PM 12:06  
TALLAHASSEE, FL

# CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312  
850-656-4724

Date: 02/23/2022

Acc#I20160000072

*en: c SW*

Name:	CL2 Orlando Holdings, LLC
Document #:	
Order #:	14797649 - 3

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
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Document _____
Examiner _____
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Amount: \$ 25.00

Thank you!

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

FILED

2023 FEB 23 AM 10:45

SECRETARY OF STATE  
TALLAHASSEE, FL.

1. The name of a limited liability company is

CL2 ORLANDO HOLDINGS, LLC

2. The Articles of Organization were filed on 1/12/2018 and assigned

document number L18000010707

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).

The Company has ceased transacting business and the Member and Manager have determined that

the Company shall not be engaged in any further business, as specified in the Company's

Limited Liability Company Agreement.

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:

G. Martin  
Signature

Guy Martin

Printed Name

FILING FEE: \$25.00