118000034773

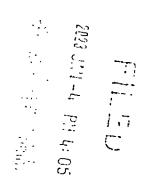
	(Requestor's Name)				
	(Address)				
(Address)					
	(City/State/Zip/Phone #)				
PICK-UF	WAIT MAIL				
	(Business Entity Name)				
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer:					





900399783269

01/04/23--01005--001 **25.00



A. RIVERS MAR 1 3 2023

COVER LETTER

	vision of Corporations						
SUBJECT:	Harris Restaurant Group, LLC						
(Name of Limited Liability Company)							
The enclosed	d Articles of Dissolution and fee(s) are submit	ted for filing.					
Please return	n all correspondence concerning this matter to	the following:					
	Walter Harris						
	(Nar	ne of Person)					
	N/A	or romany					
	(Firm/Company)						
	235 SW 10th Court						
	(Address)					
	Pompano Beach, FL 33060						
	(City/State and Zip Code)						
For further in	nformation concerning this matter, please call:						
Wa	lter Flarris	954	6635265				
	(Name of Person)	at (at Co	de & Daytime Telephone Number)				
Enclosed is a c	check for the following amount;						
■ \$25.	.00 Filing Fee and Certificate of Dissolution		Fee, Certificate of Dissolution & opy (additional copy is enclosed)				
Mai	iling Address:	Street Address					

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

- 17

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1,	The name of a limited liabili	ty company is							
	Harris Restaurant Group, LLC								
2.	The Articles of Organization	were filed on February 7th, 2	018	_ and assigned					
	document number L1800003	4773							
3.	Note: If the date inserted in the	we date the dissolution if not effective on the date of filing: 12/31/2022 (effective date cannot be prior to or more than 90 days later than date document is received for filing) erted in this block does not meet the applicable statutory filing requirements, this date will not be not's effective date on the Department of State's records.							
4.	A description of occurrence 605.0707, Florida Statutes, (that resulted in the limited liceopy 605,0707 on back cover	ability company's dis letter).	ssolution pursuant t	o section				
	Restaurant industry complication	ns caused us to close the busine	88						
5.	If there are no members, enter activities and affairs:	er the name and address of th Walter Harris	e person appointed t	o wind up the comp	oany's				
		235 SW 10th Ct, Pompano Be	ach, FL 33060	2.5 C	202.				
				 	- F				
6. ab	Signature of an authorized pove to wind up the company	erson or if there are no memb s activities and affairs:	pers, the signature of	the person appointe	ed and listed				
	Alatte Him	S and Wa	lter Harris	·	<u>-</u>				
	Signature	""	Printed	Name					

FILING FEE: \$25.00