

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

Office Use Only



000321601110

12/17/18--01024--022 **25.00

18 DEC 17 PH 4:4-

K SALY JAN 7 200

COVER LETTER

| TO: Registration Section Division of Corporations |
|---|
| SUBJECT: LZIRA 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: |
| LAWRENCE ZimblE (Name of Person) |
| LZIRA, LLC (Firm/Company) |
| 19560 SEDGEFIELD TENTACE BOCA RATON FL 33498 (City/State and Zip Code) |
| BOCA RATON, FL 33498 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| LAWIZENCE Zimble at (508) 247-1702 (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 STREET/COURIER ADDRESS: Registration Section Division of Corporations |

P.O. Box 6327

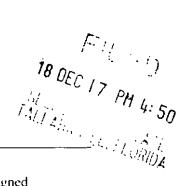
Tallahassee, FL 32314

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY



| ١. | The name of a limited liability company is LZIRA, LLC |
|-----------|---|
| 2. | The Articles of Organization were filed on FEbruary 16, 2018 and assigned |
| | document number <u>418000042431</u> |
| 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 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). IRA Rollover |
| 5. | If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: LAWRENCE Zimble 19560 SEGGEFIELD TEVYACE BOCA RATON, FL 33498 |
| 6. lis | Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs: LAURENCE Zimble Printed Name |

FILING FEE: \$25.00