

L18 0000 536 84

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

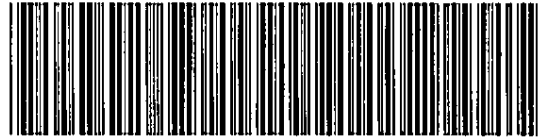
(Business Entity Name)

(Document Number)

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08/23/21--01021--026 **25.00

9/3/21

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AUDITA LENDER LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

GREGORY E. YOUNG

Name of Person

GREYFIELD ADVISERS, LLC

Firm/Company

P.O. BOX 3106

Address

PALM BEACH, FL 33480

City/State and Zip Code

gyoung@greyfieldadvisers.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GREGORY E. YOUNG

Name of Person

at (561) 573-0735

Area Code Daytime Telephone Number

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

STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement of Termination:

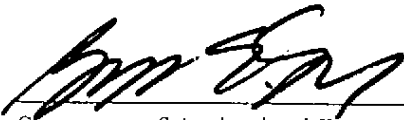
FIRST: The name of the limited liability company is: AUDITA LENDER LLC

SECOND: The Florida Document number of the limited liability company is: 118000053684

THIRD: The date of filing of the initial articles of organization is: MARCH 2, 2018

FOURTH: The date of filing of the dissolution is: MAY 20, 2021 (filing) / JULY 15, 2021 (effectiveness)

FIFTH: This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.



Signature of Authorized Representative

GREGORY E. YOUNG (Title: Authorized Signatory)

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)