

L18 000 103 674

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

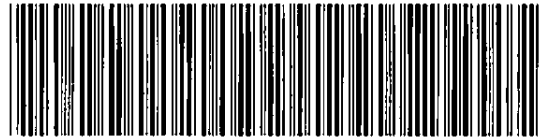
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Office Use Only



500425211415

03/08/24--01010 -029 **25.00

FILED
2024 MAR -8 PM 1:25
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: All Day Permitting and Expediting 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:

Sabine Lammey

(Name of Person)

DNX International LL

(Firm/Company)

8401 Lake Worth RD, Suite 229

(Address)

Lake Worth / Florida 33467

(City/State and Zip Code)

FILED
2024 MAR -8 PM 1:25
SECRETARY OF STATE
TALLAHASSEE, FL

For further information concerning this matter, please call:

Sabine Lammey

(Name of Person)

407

6371925

at ()

(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
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

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

All Day Permitting and Expediting LLC

2. The Articles of Organization were filed on 4/24/2018 and assigned

document number L18000103674

3. The delayed effective date the dissolution if not effective on the date of filing: 2/15/2024
(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).

No longer offering the service/ closing the business.

FILED
2024 MAR -8 PM 1:25
SECRETARY OF STATE
TALLAHASSEE, FL

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

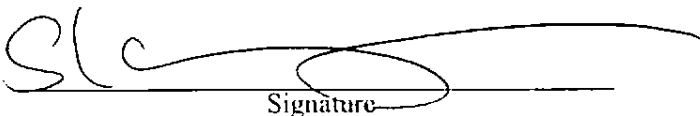
Sabine Lammey 6749 Royal Palm Beach Blvd, WPB Fl. 33412

Colton Woodard 169 Berenger Walk, Royal Palm Fl. 33414

Rachel Lammey 169 Berenger Walk, Royal Palm Fl. 33414

Brian Lammey 6749 Royal Palm Beach Blvd, WPB Fl. 33412

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:


Signature

Sabine Lammey

Printed Name

FILING FEE: \$25.00