

L18000110065

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

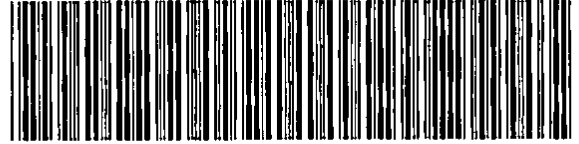
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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08/13/19--01017--020 **25.00

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2019 AUG 13 P. 11:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 13 2019
T. LEMIEUX

CHARLES T. WEISS, P.A.

Law Offices
712 U.S. Highway One, Suite 301-2
North Palm Beach, FL 33408
E-Mail: ctw@WeissEstatePlanning.com

Telephone: (561) 848-9970

Facsimile: (561) 848-9961

August 7, 2019

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

Re: **Filing of Articles of Dissolution: LouDa, LLC**

Dear Sir or Madam:

Please find enclosed the following documents for filing with the Florida Department of State:

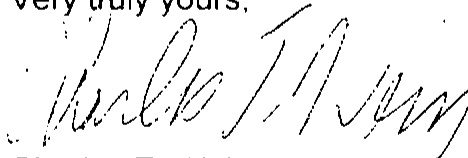
1. Articles of Dissolution; and
2. Notice of Limited Liability Company Dissolution.

Also enclosed is my Firm's check payable to the Florida Department of State in the amount of \$25 for the filing fees associated with this request.

Kindly return the Certificate of Dissolution to me at your earliest convenience.

Thank you for your assistance. Should you have any questions with regard to this request, please let me know.

Very truly yours,



Charles T. Weiss

CTW:sc
Enclosures

Copy to: Mr. David Gerson

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

1. The name of a limited liability company is

LouDa, LLC

2. The Articles of Organization were filed on May 2, 2018 and assigned

document number L18000110065

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).

Consent of all Members.

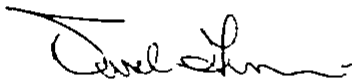
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

David Gerson

12675 Bonnington Range Drive

Boynton Beach, FL 33473

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

David Gerson

Printed Name

FILING FEE: \$25.00

FILED
2019 AUG 13 P 11:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: LouDa, LLC

Document number of Limited Liability Company is: L18000110065

Date of dissolution was: upon filing

Description of information that must be included in a written claim:

The basis for the Claim; the name and address of the
Claimant; the amount of the Claim.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

David Gerson

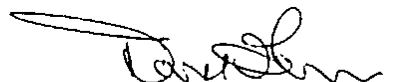
12675 Bonnington Range Drive

Boynton Beach, FL 33473

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

David Gerson

Printed Name of the Person Filing



Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00