

L18000126467

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

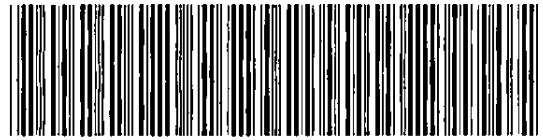
(Document Number)

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J. HORNE  
OCT 30 2024

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10/15/24--01014--011 \*\*25.00

2024 OCT 15 PM 3:18

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** GEORGEUNLIMITED, 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:

Myra M George

\_\_\_\_\_  
(Name of Person)

GEORGEUNLIMITED, LLC

\_\_\_\_\_  
(Firm/Company)

750 Creedmore Rd Ste 104

\_\_\_\_\_  
(Address)

Raleigh NC 27613

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Myra George

\_\_\_\_\_  
(Name of Person)

614

at (\_\_\_\_\_) \_\_\_\_\_

753-3511

(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**

2024 OCT 10 PM 3:18

1. The name of a limited liability company is

GEORGEUNI LIMITED, LLC

2. The Articles of Organization were filed on 5/21/2018 and assigned

document number L18000126467

3. The delayed effective date the dissolution is not effective on the date of filing: 10/08/2024  
(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).

Moved out of state

Moved out of state

Moved out of state

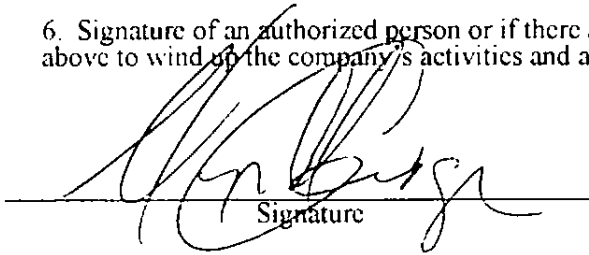
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Myra George

750 Creedmore Rd Ste 104

Raleigh, NC 27613

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

Myra M George

Printed Name

**FILING FEE: \$25.00**