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(Re	questor's Name)	
(Address)		
(Address)		
(Cit	y/State/Zip/Phone	2 #)
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		



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12/11/24--01016--023 **55.00



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COVER LETTER

TO: Registration Section Division of Corporations

Swim or Sink LLC SUBJECT: (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:

Caroline Miller (Name of Person) Gwimor Sink (Firm/Company) 3 (City/State and Zip Code)

For further information concerning this matter, please call:

ar (57) inding IVI 00 (Name of Person (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee and Certificate of Dissolution

Certified Copy (additional copy is enclosed)

<u>Mailing Address:</u> 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 il)im Or 6 2. The Articles of Organization were filed on 10 23 dV and assigned 1<u>80</u>00128588 document number 4

- 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).

3 NØ C Q ON a1010 NION ülim or 30 Q had Game Olliner owerens. 5. If there are no members, enter the name and address of the person appointed to wind up the company's B<u>ook</u> K Cellar activities and affairs: n San

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:

Printed Name **FILING FEE: \$25,00** m