L18000137016

| (Red | questor's Name) | | |
|---|-------------------|-----------|--|
| (Address) | | | |
| (Add | dress) | | |
| (City | //State/Zip/Phone | #) | |
| PICK-UP | WAIT | MAIL | |
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SECRETARY OF STATE
TAIL AHASSEE, FLORIDA

2023 SEP 19 PM 3: (

COVER-LETTER

| | istration Section ision of Corporations | | |
|--------------|---|-----------------------|--|
| SUBJECT: | SEAN BORN PLLC | | |
| SOBJECT | | Name of Limited Li | ability Company |
| Dear Sir or | Madam: | | |
| The enclose | ed Statement of Termination | n and fee(s) are sub | mitted for filing. |
| Please retur | n all correspondence conce | rning this matter to | the following: |
| SEAN BORN | N | | |
| | Name of Person | | _ |
| SEAN BORN | V PLLC | | |
| | Firm/Company | | |
| 2406 WYNG | ATE COURT | | |
| | Address | | _ |
| MOUNT DO | RA, FL 32757 | | |
| | City/State and Zip Code | 2 | |
| KASEY.BOR | RN33@GMAIL.COM | | |
| E-mail add | dress: (to be used for future | annual report notif | ication) |
| For further | information concerning this | s matter, please call | : |
| SEAN BORN | 1 | at (352 | 223-7221 |
| | Name of Person | Area Co | de Daytime Telephone Number |
| | ling Address: | | Street Address: |
| _ | istration Section | | Registration Section |
| | ision of Corporations . Box 6327 | | Division of Corporations The Centre of Tallahassee |
| | ahassee, FL 32314 | | 2415 N. Monroe Street, Suite 81 |
| | | | Tallahassee, FL 32303 |

CR2E141 (2/14)



August 22, 2023

SEAN BORN 2406 WYNGATE COURT MOUNT DORA, FL 32757

SUBJECT: SEAN BORN PLLC Ref. Number: L18000137016

We have received your document for SEAN BORN PLLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Letter Number: 023A00019479

Neysa Culligan Regulatory Specialist III

www.sunbiz.org

STATEMENT OF TERMINATION

| Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement | it of Termin | ation: |
|---|---------------------------|------------|
| FIRST: The name of the limited liability company is: SEAN BORN PLLC | | <u>. —</u> |
| | | |
| SECOND: The Florida Document number of the limited liability company is: L18000137 | 7016 | |
| THIRD: The date of filing of the initial articles of organization is: 06/01/2018 | | |
| FOURTH: The date of filing of the dissolution is: 07/31/2023 | | |
| FIFTH: This limited liability company has completed winding up its activities and affair that it will file a statement of termination. | rs and has de | etermined |
| THE WINDING UP OF ACTIVITIES IS COMPLETE. | | |
| SEAN BORN | | |
| Signature of Authorized Representative Typed or printed name of signature | 2023 SEP 19 TALLAHASSI | Tì |
| Filing Fee: \$25.00 Certified Copy: \$30.00 (optional) | TALLAHASSEE. FLOR | FILED |

CR2E141 (2/14)