# L18000140743

(Req	uestor's Name	)
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
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(Doc	ument Number	)
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### **COVER LETTER**

UBJECT:(Name of Limited Liability Company)						
nitted for filing.						
to the following:						
Name of Person)						
Firm/Company)						
(Address)						
State and Zip Code)						
all:						
786 559-6350 at () (Area Code & Daytime Telephone Number)						
(Area Code & Daytine Telephone Number)						
\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)						
Street Address:						
Registration Section Division of Corporations						
The Centre of Tallahassee						
2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303						
1						

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	ARTICLES OF DISSOLUTION FOR	ON AL	
	A LIMITED LIABILITY COMI	ANY	
The name of a limited liabili OB Cold LLC	y company is	ON PANY	
The Articles of Organization	were filed on 7/27/2018		~) <u>`</u>
locument number L1800018	)743		
Note: If the date inserted in the	ne dissolution if not effective on the dat date cannot be prior to or more than 90 days late is block does not meet the applicable statu ive date on the Department of State's reco	er than date document is received for filing) itory filing requirements, this date will i	
If there are no members, ente	er the name and address of the person a	appointed to wind up the company's	- - -
ctivities and affairs:	Daniel Forte		-
	9267 Highway 100		<del>.</del>
	New Haven, MO 63068		_
Signature of an authorized pove to wind up the company	erson or if there are no members, the si s activities and affairs:	gnature of the person appointed and	- I listed
Daniel Forte	Daniel Forte		
Signature		Printed Name	-

FILING FEE: \$25.00

### **COVER LETTER**

TO: Registration Section Division of Corporations		
OB Cold LLC		
	nited Liability Company)	
he enclosed Articles of Dissolution and fee(s) are subm	sitted for filing.	
lease return all correspondence concerning this matter	to the following:	
Daniel Forte		
(N	ame of Person)	
N/A		
(F	imv/Company)	
9267 Highway 100		
	(Address)	
New Haven, MO 63068		
(City/S	state and Zip Code)	
or further information concerning this matter. please ca	и:	
Daniel Forte	786 559-6350	
(Name of Person)	at () (Area Code & Daytime Telephone Number)	
nclosed 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:	Street Address:	
Registration Section Division of Corporations	Registration Section	
P.O. Box 6327	Division of Corporations The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street. Suite 810	
	Tallahassee, FL 32303	

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

1. The name of a limited OB Cold LLC	liability company is			·
2. The Articles of Organ	ization were filed on $\frac{7}{2}$	/27/2018	and assigned	102 A.
document number L18	8000180743		.;	All Co
(et <u>Note:</u> If the date insert	tective date cannot be prior ed in this block does not	not effective on the date of to or more than 90 days later the meet the applicable statutory spartment of State's records.	filing: N/A an date document is received for filing requirements, this date	filing) will not be
4. A description of occur 605.0707. Florida Statu	rence that resulted in the lates, (copy 605.0707 of	he limited liability compan n back cover letter).	ry's dissolution pursuant to	section
Business was s	old on 11/30/2023		<del></del>	
	rs, enter the name and	address of the person appo	inted to wind up the comp	any's
activities and affairs:	9267 Highway I	00		<del></del>
	New Haven, MC			
<ol> <li>Signature of an authoriabove to wind up the com</li> </ol>	zed person or if there a pany's activities and a	are no members, the signat	ure of the person appointe	d and listed
Daniel F		Daniel Forte		
Signate	ire	P	rinted Name	

FILING FEE: \$25.00