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COVER LETTER

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	istration Section ision of Corporations							
SUBJECT:	Rental AAA LLC							
SUBJECT.	(Name of Limite	d Liability Compa	ny)		_			
The enclosed	d Articles of Dissolution and fee(s) are submitt	ed for filing.						
Please return	all correspondence concerning this matter to	the following:						
	Thomas R. Jackson			شيون	Ī	•		
(Name of Person)								
Rental AAA LLC						T		
	(Firm	n/Company)		 -	LIMUY CE INT	(T		
	518 Feather Palm Drive			1	<u>΄</u>	IJ		
		Address)			r.			
	Vero Beach, Florida 32963			:-	•			
	(City/Sta	te and Zip Code)						
For further in	nformation concerning this matter, please call:							
The	omas Jackson	908	295-4996					
	(Name of Person)	at ((Area C	ode & Daytime Telephone	Number)	_			
Enclosed is a	check for the following amount:					. ~		
☐ \$2 5	5.00 Filing Fee and Certificate of Dissolution		g Fee, Certificate of Dissolu Copy (additional copy is ea	ution & F iclosed)	-R1	AUD		
	ailing Address:	Street Addres						
	gistration Section vision of Corporations	Registration Section Division of Corporations						
	O. Box 6327		of Tallahassee	10				
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303								

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	A LIM	ITED LIABI	LITY COMPAN	NY	15.	3
l.	The name of a limited liability compa	any is				Fill Part
				· <u>-</u>		im
2.	The Articles of Organization were fil	ed on Septembe	er 14, 2021	and assig	gned	A 8
	document number 4115327252CR	 .	_		#1 1 m 6 3 7 m # 1	કં. ર્ડ્રા ક
3.	The delayed effective date the dissolution (effective date cannot Note: If the date inserted in this block listed as the document's effective date of	it be prior to or mo does not meet th	re than 90 days later the applicable statutory	an date document is filing requirement	received for ts, this date	filing) will not be
4.	A description of occurrence that resu 605.0707, Florida Statutes, (copy 605	Ited in the limi .0707 on back	ted liability compa cover letter).	ny's dissolution p	oursuant to	section
	Rental AAA LLC was fraudulemtly reins	stated using my	name, address, and st	olen credit card nu	mber.	
	If there are no members, enter the na activities and affairs:					any's
6. al	Signature of an authorized person or pove to wind up the company's activit	if there are no ies and affairs:	members, the signs	ature of the perso	n appointe	a and listed
4	Tomas Dochson		Thomas R. Jackse			
	Signature	DEL INC	EEE. 635 00	Printed Name		
	U	FRY	FEE: \$25.00 _ PUD			