

L18000243867

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

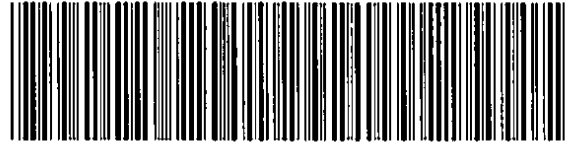
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800375911068

RECEIVED

2021 NOV 24 AM 11:35

CLERK'S OFFICE

2021 NOV 24 AM 8:30

cus/coc
ANTIBS

NOV 29 2021
1 ALBRITTON

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 265262 7475225
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 55.00

ORDER DATE : November 23, 2021
ORDER TIME : 5:0 PM
ORDER NO. : 265262-005
CUSTOMER NO: 7475225

DOMESTIC FILINGS

NAME: ST. PETE MANAGER, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker - EXT#

EXAMINER'S INITIALS:

[Signature]

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ST. PETE MANAGER, 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:

Julie M. Levitt

(Name of Person)

(Firm/Company)

2700 Tigertail Ave

(Address)

Miami, FL 33133

(City/State and Zip Code)

For further information concerning this matter, please call:

Cibel Menendez

(Name of Person)

at (305) 755-3064
(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**

2021 NOV 21 PM 8:30

1. The name of a limited liability company is

ST. PETE MANAGER, LLC

2. The Articles of Organization were filed on 10/19/2018 and assigned

document number L18000243867

3. The delayed effective date the dissolution if not effective on the date of filing: 11/17/2021

(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).

Ceased doing business

Ceased doing business

Ceased doing business

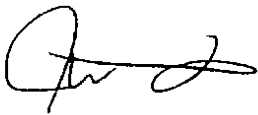
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Julie M. Levitt

2700 Tigertail Ave

Miami, FL 33133

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

Julie Levitt

Printed Name

FILING FEE: \$25.00