1800	0250468
(Requestor's Name) (Address) (Address)	500377510675
(City/State/Zip/Phone #)	12/08/2101014009 ***25.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	2021 DEC -8 AM 9: 17 That of State Anasse, FL
Office Use Only	RECEIVING 2021 DEC -8 PH 12: 45 "TALLAHASSES FORIDA
	Y SULKER DEC 09 2021

COVER LETTER

TO: Registration Section Division of Corporations

CENTURIA DEVELOPMENT, 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:

John Ainsworth, Esq.

(Name of Person)

Ainsworth & Clancy, PLLC

(Firm/Company)

1100 Brickell Bay Dr. #310747

(Address)

Miami, FL 33231

(City/State and Zip Code)

For further information concerning this matter, please call:

John Ainsworth	305 600-3816
	at ()
(Name of Person)	(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

S55.00 Filing Fee, 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 <u>Street Address:</u> 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

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1.	The name of a limited liabili CENTURIA DEVELOPMENT		
2.	The Articles of Organization	were filed on <u>10/24/2018</u>	and assigned
	document number L1800025)468	
3.	 <u>Note:</u> If the date inserted in the 	ne dissolution if not effective on the da date cannot be prior to or more than 90 days la his block does not meet the applicable stat live date on the Department of State's rec	ate of tiling:
4.	605.0707. Florida Statutes. (that resulted in the limited liability co opy 605.0707 on back cover letter).	ompany's dissolution pursuant to section
	voluntary dissolution		
	voluntary dissolution		
	voluntary dissolution		
5.	If there are no members, ent	er the name and address of the person	appointed to wind up the company
	activities and affairs:	not applicable	
			-8
			COL AM 9

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

KC Dorame

Printed Name

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FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

CENTURIA DEVELOPMENT, LLC

Document number of Limited Liability Company is:

Date of dissolution was: _____

Description of information that must be included in a written claim:

Amount, name of claimant, phone number of claimant, address of claimant, and a short description of facts resulting

in claim.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

1100 Brickell Bay Dr. #310747

Miami, FL 33231

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

KC Dorame

Printed Name of the Person Filing

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00