

## 48000 253 217

(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		
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05/08/24 -01008--001 \*#25.00

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FILED



## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: 10000 GATE JAKKW	d Liability Company)	
The enclosed Articles of Dissolution and fee(s) are submitted	ed for filing.	
Please return all correspondence concerning this matter to t	he following:	
John M. Peger	Sen e of Person)	
(Firm/Company)		
1031 041E CHA	ther LAME	
1031 OHE CH		
Gheers Boko (City State	5A . 30642 e and Zip Code)	
For further information concerning this matter, please call:		
JOHN PETERSEN (Name of Person)	at (964) 403-649 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
Mailing Address: Registration Section Division of Corporations	☐ \$55,00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)	
Mailing Address: Registration Section SUB MITTER	Street Address: Registration Section	
Division of Corporations 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 liability company is  1. The name of a limited liability company is  1. The name of a limited liability company is
2. The Articles of Organization were filed on and assigned
document number <u>L 18080253217</u>
3. The delayed effective date the dissolution if not effective on the date of filing: 61124 (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).    PROPERTY WAS SOLD 16/25   1.3. This Had began the content of the
A Renigh 1 Koterty Personal owned by me.
I WAT TO DISSOLVE THE LLC, And RECEIVE NO RIKTIEK
MOTICES: THANK YOY.
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:    TOB M.   PERSON
1031 OLDE CHAPEL LAME
Greenstokt, GA. 30642
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:
John Retasen John M. Peressen
Signature JOHN M. LETEKSEN Signature Printed Name FILING FEE: \$25.00