

48000257555

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(Address)

(Address)

(City/State/Zip/Phone #)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ELUMINATE HOLDINGS COMPANY, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Adam Zhamukhanov

Name of Person

Adam Legal, PLLC

Firm/Company

2326 S. Congress Ave., Suite 21D

Address

Palm Springs, Florida 33406

City/State and Zip Code

adam@adamzlegal.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Adam Zhamukhanov

Name of Person

at (386) 627-0746

Area Code Daytime Telephone Number

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

STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement of Termination:


FIRST: The name of the limited liability company is: ELUMINATE HOLDINGS COMPANY, LLC

SECOND: The Florida Document number of the limited liability company is: 1.18000257555

THIRD: The date of filing of the initial articles of organization is: 11/01/2018

FOURTH: The date of filing of the dissolution is: 02/12/2020

FIFTH: This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.



Signature of Authorized Representative

Paul Sandhu

Typed or printed name of signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

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STATE OF FLORIDA
TALLAHASSEE FL 32309