## L18000261178

| (Requestor's Name)  |  |  |  |
|---|--|--|--|
|   |  |  |  |
| (Address)   |  |  |  |
|   |  |  |  |
| (Address)   |  |  |  |
|   |  |  |  |
| (City/State/Zip/Phone #)  |  |  |  |
|   |  |  |  |
| PICK-UP WAIT MAIL   |  |  |  |
|   |  |  |  |
| (Business Entity Name)  |  |  |  |
|   |  |  |  |
| (Document Number)   |  |  |  |
|   |  |  |  |
| Certified Copies Certificates of Status   |  |  |  |
|   |  |  |  |
| Consider the control of the control |  |  |  |
| Special Instructions to Filing Officer:   |  |  |  |
|   |  |  |  |
|   |  |  |  |
|   |  |  |  |
|   |  |  |  |
|   |  |  |  |
|   |  |  |  |

Office Use Only



400415887794

09/21/23--01013--008 \*\*25.00

2023 SEP 21 PM 4: 02

## COVER LETTER

TO:

Registration Section Division of Corporations

| SUBJECT: Power Sales Group, LLC   |                           |  |  |
|---|---------------------------|--|--|
| (Name of Lim  | ited Liability Company    | ;)   |  |
|   |                           |  |  |
| The enclosed Articles of Dissolution and fee(s) are subm  | itted for filing.         |  |  |
| Please return all correspondence concerning this matter to  | o the following:          |  |  |
| Todd No   | ممالمه                    |  |  |
| Todd McLellan (Name of Person)  |                           |  |  |
|   | ,                         |  |  |
| (Fi   | rm/Company)               | <del></del>  |  |
| 11051 600   | etra man                  |  |  |
| 11056 Coni:   | (Address)                 |  |  |
|   |                           |  |  |
| Windermere, Flor  | ida 34 I                  | 86   |  |
| Слугэ   | tate and rap code)        |  |  |
| For further information concerning this matter, please cal  | II:                       |  |  |
| Todd McLellan   | . ፈለግ                     | 353-6685   |  |
| (Name of Person)  | at ( TO 1 (Area Cod       | at (467) 353- 66 85 (Area Code & Daytime Telephone Number) |  |
|   |                           |  |  |
| Enclosed is a check for the following amount:   |                           |  |  |
| S25.00 Filing Fee and Certificate of Dissolution  □ \$55.00 Filing Fee, Certificate of Dissolution Certified Copy (additional copy is enclosed) |                           |  |  |
|   |                           |  |  |
| Mailing Address:  | Street Address:           | Street Address:  |  |
| Registration Section  |                           | Registration Section                                       |  |
| Division of Corporations  |                           | Division of Corporations                                   |  |
| P.O. Box 6327   | The Centre of Tallahassee |  |  |
| Tallahassee, FL 32314   |                           | 2415 N. Monroe Street, Suite 810                           |  |
|   | Tallahassee, F            | Tallahassee, FL 32303                                      |  |

## ARTICLES OF DISSOLUTION

Pursuant to Section 605.0707, Florida Statutes, this Florida limited liability company submits the following Articles of Dissolution:

FIRST: The name of the limited liability company as currently filed with the Florida Department of State is POWER SALES GROUP, LLC

SECOND: The Articles of Organization were filed on November 9, 2018 and assigned document number L18000261178.

THIRD: The date dissolution was approved on September 13, 2023.

FOURTH: the dissolution occurred as a result of the written consent of all members to cease business operations and dissolve the company

Approved:

Signature:

Lodd K. McLellan, Member

Date: 9 13 2023

FILED

123 SEP 21 PM 4: 02