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Certified Copies	_ Certificates o	Status
Special Instructions to	Filing Officer:	-
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## **COVER LETTER**

TO:

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

SUBJECT: The WorkBench Custom Carpentry, 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:	
Joseph Lupia (Name of Person)	
The Work Bench Crestony Congrentry (Firm/Company)	
7256 S.E. Magellan Lane	
Sturrt, FL 34997 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Joseph Lunga at (203) 339-1135 (Name of Person) (Area Code & Daytime Telephone Number)	
inclosed is a check for the following amount:	
\$25.00 Filing Fee and Certificate of Dissolution	
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of Corporations	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is
	The Work Bench Custom Carpentry, LLC
2.	The Articles of Organization were filed on $\frac{12}{18}/2018$ and assigned
	document number <u>L/8000286608</u>
3.	The delayed effective date the dissolution if not effective on the date of filing: 2/6/2023  (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).
	No Longer doing Business.
	FL FL
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs: Closeph Lypia 7256 SE Magellan Ime Stunet, FL. 34997
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed love to wind up the company's activities and affairs:
/	)
	Joseph Lupin
/<	/Signature Printed Name

**FILING FEE: \$25.00**