

L19 000060128

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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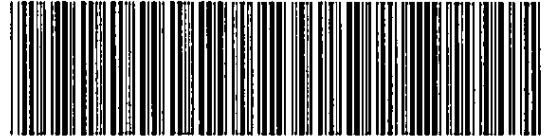
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2023 JAN 17 AM 9:30
CLERK OF COURT

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PASADENA AMD V, 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:

Abbigail WSebb, Esq.

(Name of Person)

ACMGMT, LLC

(Firm/Company)

5875 NW 163rd Street, Suite 105

(Address)

Miami Lakes, Florida 33014

(City/State and Zip Code)

For further information concerning this matter, please call:

Abbigail Webb, Esq.

(Name of Person)

305

779-9160

at ()

(Area Code & Daytime Telephone Number)

2023 JAN 17 AM 9:30

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Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee and Certificate of Dissolution

☐ \$55.00 Filing Fee, Certificate of Dissolution &
Certified Copy (additional copy is enclosed)

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

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
PASADENA AMD V, LLC
2. The Articles of Organization were filed on 12/28/2018 and assigned
document number L19000000128
3. The delayed effective date the dissolution if not effective on the date of filing: 12/31/22
(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).

The business for which the entity formed did not begin operations.

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs:

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

Ali Ahmed, Manager

Printed Name

FILING FEE: \$25.00

FILED

2023 JAN 17 AM 9:30