

L19 000002575

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

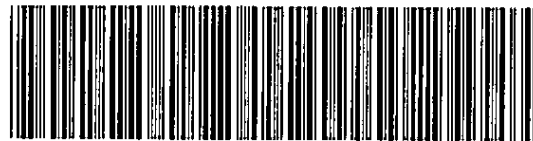
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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CLERK OF STATE  
OFFICE OF CORPORATIONS  
20 JUL -5 AM 11:45

*Dissolution*

AUG 16 2020

D CUSHING

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Dealer Slash 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:

Adrian Cristea  
(Name of Person)

Dealer Slash LLC  
(Firm/Company)

1183 Fraser Pine Blvd  
(Address)

Sarasota FL 34240  
(City/State and Zip Code)

For further information concerning this matter, please call:

Adrian Cristea at (941) 536-4992  
(Name of Person) (Area Code & Daytime Telephone Number)

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

20 JUL -6 AM 11:45

RECEIVED  
DIVISION OF CORPORATIONS  
JUL 20 2006

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

1. The name of a limited liability company is

Dealer Slesh LLC

2. The Articles of Organization were filed on 12/31/2018 and assigned

document number L19000002575

3. The delayed effective date the dissolution if not effective on the date of filing: 06/19/2019  
(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).

Company never ended up launching.

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

Adrian Cristea

1183 Fraser Pine Blvd

Sarasota FL 34240

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

Adrian Cristea

Printed Name

**FILING FEE: \$25.00**

20 JUL -6 AM 11:45

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS & BUSINESSES