

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : ALLEY, MAASS, ROGERS & LINDSAY, P.A.  
Account Number : 072100000047  
Phone : (561) 659-1770  
Fax Number : (561) 833-2261

LLC DISSOLUTION OR WITHDRAWAL  
MYALLEGRIA LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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Corporate Filing Menu

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H200000437603

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MYALLEGRIA 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:

Robb R. Maass, Esq.

(Name of Person)

Alley, Maass, Rogers + Lindsay, P.A.

(Firm/Company)

340 Royal Poinciana Way, Suite 321

(Address)

Palm Beach, FL 33480

(City/State and Zip Code)

For further information concerning this matter, please call:

Robb R. Maass

(Name of Person)

at ( 561 ) 659-1770

(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

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ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

MYALLEGRIA LLC

2. The Articles of Organization were filed on January 9, 2019 and assigned

document number L19000006942

3. The delayed effective date the dissolution if not effective on the date of filing: 12/31/2019

(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).

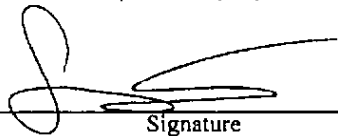
The members consented in writing to the dissolution.

All remaining property + assets have been distributed to the members.

The company is no longer needed.

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

Feb 10, 2020

Printed Name

FILING FEE: \$25.00