

L19000044614

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

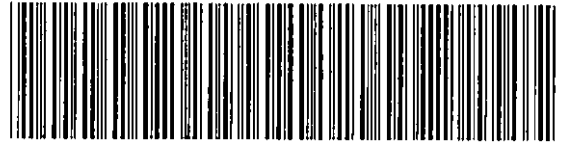
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2024 SEP 24 AM 11:53

TALLAHASSEE, FLORIDA

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2024 SEP 28 AM 4:24

ALLAHABAD, INDIA



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: I200000000088
If there are any issues
please contact Patrice at
850-202-9071

Date: 09/24/2024

Name: Cheyenne Davis

Reference #: 2503032

Entity Name: SPE GROUP LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

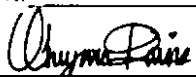
☐ Merger

☒ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other _____

Authorized Amount: \$25.00

Signature: 

✉ CORPORATE HQ
COGENCY GLOBAL INC.
10 E 40TH ST, 10TH FL
NY, NY 10016
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P: 800.221.0102
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✉ EUROPEAN HQ
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✉ ASIA PACIFIC HQ
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ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

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2024 SEP 24 AM 11:53

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

SPE Group LLC

2. The Articles of Organization were filed on February 13, 2019 and assigned

document number L19000044614

3. The delayed effective date the dissolution if not effective on the date of filing: _____
(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 limited liability company dissolves by the consent of its sole Member.

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

Michael Cohen

Printed Name

FILING FEE: \$25.00