119000066707

(Requestor's Name)
(Address)
(Address)
(Audiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Consist to a Silico Officer
Special Instructions to Filing Officer:
}

Office Use Only



900363527809

RECEIVED
APR 1 2 2021

<u> 5400.000 0000 001 4.50.05</u>



COVER LETTER

.

TO:

imited Liability Company)
bmitted for filing.
er to the following:
(Name of Person)
(Firm/Company)
(Address)
(Address)
y/State and Zip Code)
call;
786 564-5151
(Area Code & Daytime Telephone Number)
☐ \$55.00 Filing Fee. Certificate of Dissolution & Certified Copy (additional copy is enclosed)
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

2. The Articles of Organization were filed on March 8th 2019	and assigned
document number	
The delayed effective date the dissolution if not effective on the (effective date cannot be prior to or more than 90 days Note: If the date inserted in this block does not meet the applicable st listed as the document's effective date on the Department of State's re	tater than date document is received for filing) tatutory filing requirements, this date will not
. A description of occurrence that resulted in the limited liability c 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).	company's dissolution pursuant to section
The LLC never had any activity.	
The LLC never had any activity.	
The LLC never had any activity.	
. If there are no members, enter the name and address of the perso activities and affairs:	n appointed to wind up the company's
	TAC 20
5. Signature of an authorized person or if there are no members, the bove to wind up the company's activities and affairs:	e signature of the person appointed and it
CANTALINE MILE	reina Luciani