1000076691

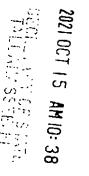
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 3, 2021

MICHAEL SOBEL 915 MIDDLE RIVER DR SUITE 105 FT LAUDERDALE, FL 33304

SUBJECT: NEW PELICAN, LLC Ref. Number: L19000076691

We have received your document for NEW PELICAN, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a PARTNERSHIP, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 021A00023923

Catherine M Brumbley Regulatory Specialist II

www.sunbiz.org

COVER LETTER

Division of Corporations					
SUBJECT: NEW PELICAN, LLC (Name of Limited Liability)					
(Name of Limited Liability Company)					
The enclosed Articles of Dissolution and fee(s) are submitted for fili	ng.				
Please return all correspondence concerning this matter to the following:					
MICHAEL A SUBEL (Name of Person)					
(Name of Person)					
(Firm/Company)					
915 MIDDLE RIVER DR. SUITE 105					
(Address)					
FORT LAUDERDALE FL 33304 (City/State and Zip Code)					
(City/State and Zip Code)					
For further information concerning this matter, please call:					
MICHAEL SORFI	954 , 524 5900 × 302 (Area Code & Daytime Telephone Number)				
(Name of Person)	(Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:					
S25.00 Filing Fee and Certificate of Dissolution S55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)					
	t Address: istration Section				
Division of Corporations Division of Corporations					
P.O. Box 6327 The Centre of Tallahassee					

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability	company is NEW	PELICAN LLC	n
2.	The Articles of Organization v	were filed on <u>MAR</u>	CH 19, 2019 an	nd assigned
	document number <u>L1900</u>	000 766 91	-	
3.	The delayed effective date the (effective da Note: If the date inserted in this listed as the document's effective	ate cannot be prior to or more s block does not meet the	than 90 days later than date docu applicable statutory filing requ	ment is received for filing) irements, this date will not be
4.	A description of occurrence th 605.0707, Florida Statutes. (co	nat resulted in the limite opy 605.0707 on back co	d liability company's dissol over letter).	ution pursuant to section
	NO LONGER IN	BUSINESS		SEL 2021
				0CT
				55.2 5
				50 A 111 50 10 1
5.	If there are no members, enter activities and affairs:		of the person appointed to w A SOBEL	ind up the company's
		915 MIDI	DIE RIVER DR	
			Suite 105	
		FORT LAUL	DerDale, Fi	33304_
6. ab	Signature of an authorized per pove to wind up the company's	rson or if there are no m		person appointed and fisted
			MICHAFI A	SCBFI
	Signature		MICHAEL A. Printed Na	ime

FILING FEE: \$25.00