## L19000112189

(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:				
Q. SILAS				
JUL 2 9 2022				

Office Use Only



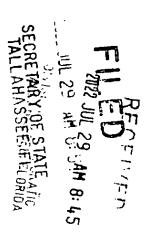
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FILED

JUL 29 AH V: 5

SECRETARY OF STATE
SECRETARY OF STATE



## **COVER LETTER**

TO: Registration Section Division of Corporations	•
SUBJECT: Summer Velo 110 (Name of Limited)	Liability Company)
The enclosed Articles of Dissolution and fee(s) are submitted	Articles of Dissolution and fee(s) are submitted for filing.  all correspondence concerning this matter to the following:    Lata SO   D
Please return all correspondence concerning this matter to the	e following:
Latora SO 7	of Person)
Summer Velo	Company)
<u>PO. Box 1720-7</u>	ddress)
Tampa Hy 336 (City/State	and Zip Code)
For further information concerning this matter, please call:	
batoga SOTO (Name of Person)	
Enclosed is a check for the following amount:	
☐ \$25.00 Filing Fee and Certificate of Dissolution	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Section Division of Corporations

Tallahassee, FL 32303

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

1. The r	name of a limited liability company is		1411 JUL 29 AM	ชะ5 <u>7</u>
	Suma Velo 110	4.41	SECRETARY OF TALLAHASSEE	
2. The .	Articles of Organization were filed on 4/24/6	20/9	and assigned	I. FL
docu	ment number <u>[                                   </u>			
Note	delayed effective date the dissolution if not effective (effective date cannot be prior to or more than e: If the date inserted in this block does not meet the applid as the document's effective date on the Department of S	i 90 days later than date do icable statutory filing re		
I. A de: 605.0	scription of occurrence that resulted in the limited lis 1707, Florida Statutes. (copy 605.0707 on back cover	ability company's diss letter).	solution pursuant to	section
$Q_{l}$	1096 bussibes & reloca	to back	to Say	:sov.14
1				
	<del>/</del>			
				<del></del>
	ere are no members, enter the name and address of the rities and affairs:	e person appointed to	wind up the compa	ny`s
	<del></del>			
				<del></del>
		<del></del>	<u> </u>	
5. Signa ibove to	ature of an authorized person of if there are no membowind up the company's activities and affairs:	pers, the signature of t	he person appointed	I and listed
	h	saloya SO	Б	
	Signature	Printed	Name	

FILING FEE: \$25.00