L19000167797

(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:

Office Use Only



600366888976

08/01/21--01018--030 **50.00



JIJL 2021

Robert J. Vema Founder

Paul Verna, CPA Principal



Timothy J. Battista Principal

Kerry Andrew Revelas, CPA
Principal

April 26, 2021

James Tran Universal Hemp Group LLC 1524 Sheepshead Bay Road – 24 A Brooklyn NY 11235

Dear James:

Enclosed are the Termination and Dissolution forms to close Universal Hemp Group LLC. Please sign both forms where indicated and mail together with a check in the amount of \$50 made payable to Florida Department of State.

Mall to: State of Florida Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

When you receive a response, please forward a copy to my attention.

If you have any questions, please do not hesitate to call me at 856-384-8400.

Sincerely.

Robert D Cann, CPA Verna & Associates

RV Professional Building • 105 Jessup Road • Thorofare, NJ 08086-2138

Media Professional Building • 104-106 W. Front Street • Media, PA 19063-3208

Phone. 856.384.8400 • Fax. 856.384.1622



COVER LETTER

	sion of Corporations			
	UNIVERSAL HEMP GROUP LLC			
NOBJECT	(Name of Limit	ed Liability Company)	
The enclosed :	Articles of Dissolution and fee(s) are submit	ted for filing.		
Please return a	all correspondence concerning this matter to	the following:		
	PAUL VERNA CPA			
	(Nar	ue of Person)		
	VERNA & ASSOCIATES			
	(Fir	n/Company)		
	(Name of Person) VERNA & ASSOCIATES (Firm/Company) 105 JESSUP ROAD (Address) THOROFARE NJ 08086 (City/State and Zip Code) or information concerning this matter, please call:			
	-			
	(Name of Person) VERNA & ASSOCIATES (Firm/Company) 105 JESSUP ROAD (Address) THOROFARE NJ 08086 (City/State and Zip Code) er information concerning this matter, please call: PAUL VERNA 856 384-8400			
	(City/Si	ite and Zip Code)		
For further inf	ormation concerning this matter, please call	:		
PAU	L VERNA		384-8400	
	(Name of Person)		e & Daytime Telephone Number)	
Enclosed is a ch	neck for the following amount:			
≣ \$25,0	00 Filing Fee and Certificate of Dissolution			
Mailing Address: Registration Section Division of Corporations P.O. Box 6327		Street Address: Registration Section Division of Corporations The Centre of Tallahassee		
Tall	ahassee, FL 32314	2415 N. Mont Tullahassee, F	roe Street, Suite 810	

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

6. Signature of an authorize	d person or if there are no members, the signatury's activities and affairs:	ure of the person	appoint	ed and
	BROOKLYN NY 11235		ŧ	
	BROOKLYN NY 11235			
		19.44 17.44	11 2:	الارب: ۲۰۰۰ الارب: ۲۰۰۰
	1524 SHEEPSHEAD BAY ROAD - 24 A		<u></u>	
i. If there are no members, activities and affairs:	JAMES TRAN	nted to wind up th	e comp	any s
			- · · · · · · · · · · · · · · · · · · ·	
ENTITY DID NOT BEGIN A	ANY ACTIVITY		- 1.	,
ENTITY DID NOT BEGIN	ANY ACTIVITY			*
 A description of occurren- 605.0707, Florida Statutes ENTITY DID NOT BEGIN 	ce that resulted in the limited liability company, (copy 605.0707 on back cover letter). ANY ACTIVITY	r's dissolution pur	suant t	o secti
listed as the document's eff	n this block does not meet the applicable statutory feetive date on the Department of State's records	- '		
reffecti	the dissolution if not effective on the date of the date of the date cannot be prior to or more than 90 days later than	i date document is rec	eived for	r filing)
document number £.1900	0167797			
The Attractor of Organizat	ion were filed on <u>6/26/2019</u>	and assign	ed	
The Articles of Organizati				