

L19000182250

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

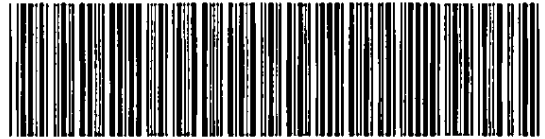
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04/28/22--01012--010 ++25.00

FILED  
2022 APR 28 PM 3:49  
CLERK OF COURT  
JULIA A. BROWN

*Dissolution*

11252  
DOCUMENT

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** W.Royal Investments LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Prentice Williams

(Name of Person)

(Firm/Company)

7710 Eaton Avenue

(Address)

Jacksonville FL 32211

(City/State and Zip Code)

For further information concerning this matter, please call:

Prentice Williams

(Name of Person)

619

5387626

at ( )

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee and Certificate of Dissolution

☐ \$55.00 Filing Fee, Certificate of Dissolution &  
Certified Copy (additional copy is enclosed)

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

W.Royal Investments LLC

2. The Articles of Organization were filed on July 16th 2019 and assigned

document number L19000182250

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.

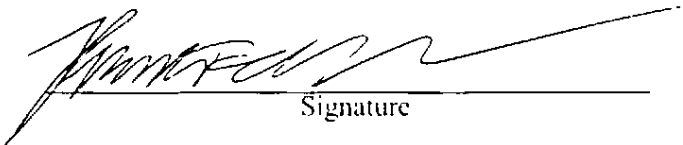
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes. (copy 605.0707 on back cover letter).

Due to Covid we were unable to get the sales that we hoped for, as everyone was in a financial crisis.

Due to us not being able to have the sales we hoped for, we lost money and sat on merchandise for a period of time.

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

Prentice Williams

Printed Name

**FILING FEE: \$25.00**

2022 APR 26 PM 3:49  
STATE OF FLORIDA  
DEPARTMENT OF STATE