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| Certified Copies | Certificates of | Status |
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| Special Instructions to F | iling Officer: | |
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Office Use Only



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DISCORDED TRICE
OVVISION OF CORPORATIONS
TALLAHAS SEPREDRATIONS

CORPORATE ACCESS, ___

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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| XX | FILING | DISSOLUTION | |
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ARTICLES OF DISSOLUTION OF ADONAL MARKETING AND CONSULTING LLC

ADONAI MARKETING AND CONSULTING LLC (the "Company"), organized and existing under the Florida Revised Limited Liability Company Act (the "Act"), does hereby certify, pursuant to the provisions of Section 605.0707 of the Act, as follows:

- 1. The name of the Company is: ADONAI MARKETING AND CONSULTING LLC.
- 2. The Articles of Organization of the Company were filed on August 7, 2019 and assigned document number L19000200859.
- 3. The voluntary dissolution of the Company was approved by the sole member of the Company on November 20, 2023 in accordance with the operating agreement of the Company and the Act.

[Signature page follows]

2023113V 21 PH 2: 29

IN WITNESS WHEREOF, the undersigned has duly executed these Articles of Dissolution as of this 20th day of November, 2023.

La 1/11

JAMES GILLETTE

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

| Name of Limited Liability Company: Adonai Marketing and Consulting LLC | |
|--|------------|
| Document number of Limited Liability Company is: L19000200859 | |
| Date of dissolution was: November 20, 2023 | |
| Description of information that must be included in a written claim: | |
| (1) Name and address of the person or entity filing the claim; | |
| (2) The amount of the claim; | |
| (3) A description of the facts and circumstances surrounding the claim; | |
| (4) The date such amount was incurred; | |
| (5) Any and all documentation supporting the claim. | |
| Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) James Gillette 4750 Monarch Way | 1 |
| Coconut Creek | |
| FL 33073 | |
| A claim against the above named limited liability company will be barred unless a proceeding to enclaim is commenced within 4 years after the filing of this notice. James Gillette | nforce the |
| Printed Name of the Person Filing 17170786F8013F5 Signature of the Person Filing | |

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00