L19 000259775

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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COVER LETTER

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TO:

Registration Section

Division of Corporations							
SUBJECT:	Do With Purpose LLC CT:						
,	(Name of Limited Liability Company)						
The enclosed	Articles of Dissolution and fee(s) are submitt	ed for filing.					
Please return	all correspondence concerning this matter to t	he following:					
	Michaela Short						
	(Name of Person)						
	Do With Purpose LLC						
	(Firm/Company)						
	740 SW 5th St						
	(Address)						
	Cape Coral FL 33991						
(City/State and Zip Code)							
For further in	formation concerning this matter, please call:						
Michaela Short		313 378-6306 at ()					
	(Name of Person)	(Area Code & Daytime Telephone Number)					
Enclosed is a cl	heck 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:		Street Address:					
Registration Section		Registration Section					
	ision of Corporations . Box 6327	Division of Corporations The Centre of Tallahassee					
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liabil Do With Purpose LLC	ity company is				_•	
2.	The Articles of Organization	n were filed on 10/16/20	19	and assigned			
	document number L1900025	9775	_				
3.	The delayed effective date the (effective Note: If the date inserted in the listed as the document's effective date the delayed effective date in the delayed effective date the delaye	his block does not meet th	e applicable statutory filin	ng: 12/31/2019 e document is received g requirements, this d	for filing ate will) not be	
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).						
	business never started, did not h	nave income					
	business never started, did not h	nave income		A	20 F	_	
	business never started, did not h	ave income		Ł	- C3	Ti	
					70	;Ti	
5.	If there are no members, ent activities and affairs:	er the name and address Michaela Short	s of the person appointed	to wind up the con	ကူapy's ထို	- 	
		740 SW 5th St, Cape Co	oral FL 33991			_	
						-	
6. at	Signature of an authorized pove to wind up the company	erson or if there are no s activities and affairs:	members, the signature	of the person appoir	nted and	- I listec	
7	William CSO -	(Michaela Short	J.N.		_	
	Signature		Printe	ed Name			

FILING FEE: \$25.00