119000 274885

(Re	questor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies Certificates of Status		s of Status
Special Instructions to Filing Officer:		
		ļ

Office Use Only



400346067374

06/15/20--01015--015 **25.00

2020 JUH 15 PH 3: 33

ALJ D155

JUL 0 6 ZUZU

I ALBRITTON

COVER LETTER

Division of Corporations		
SUBJECT: 4811 - 64 DV. W. 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:		
Jennifer Kenna (Name of Person)		
Aspire Home Buyer (Firm/Company)		
3021 Manatee Av. W. Swite A		
Bradenton FL 34205 (City/State and Zip Code)		
For further information concerning this matter, please call:		
<u>Jenni Fey Kennor</u> at <u>(441)</u> 213-8880 (Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$25.00 Filing Fee and Certificate of Dissolution \$\square \\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)		
Mailing Address: Street Address:		

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

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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY The name of a limited liability company is 4811 643 Dr. (a) LLC			
1.	The name of a limited liability company is 4811 643 Dr. W LLC			
2.	The Articles of Organization were filed on Junuary 1st 2020 and assigned			
	document number <u>L-1-9000.274885</u>			
	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.	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). 5044 Business			
5	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:			
	Bradenton FL 34205			
e a	Signature of an authorized person or if there are no members, the signature of the person appointed and listed bove to wind up the company's activities and affairs:			
	Jennifer Kenna Printed Name			
	Signature FILING FEE: \$25.00			