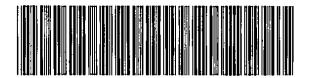
## W19 (CC 375344

(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



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## **COVER LETTER**

Registration Section Division of Corporations

TO:

WAMAN GROUP SERVICES LLC SUBJECT:					
(Name of Limite	ed Liability Company)				
The enclosed Articles of Dissolution and fee(s) are submitted					
Please return all correspondence concerning this matter to	the following:				
Segundo Huaman					
(Nan	ne of Person)	_			
Waman Group Services LLC					
(Firm/Company)					
1158 White Pine Dr					
(Address)					
Wellington, FL. 33414	· · · · · · · · · · · · · · · · · · ·	2021			
(City/Sta	te and Zip Code)				
For further information concerning this matter, please call:		2021 DEC 10 PH			
Segundo Huaman	561 860-3776 .	် <u>မှ</u>			
(Name of Person)	at ()	ကုံရာ) ယ			
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:	Street Address:				
Registration Section	Registration Section				
Division of Corporations	Division of Corporations				
P.O. Box 6327 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 liabilit	y company is				
	WAMAN GROUP SERVICES	LLC			·	
2.	The Articles of Organization	were filed on November	04, 2019	and assigned		
	document number L19000275	344	_			
3.	The delayed effective date the (effective date inserted in the listed as the document's effective date inserted in the listed as the document's effective date the document of the listed as the listed	is block does not meet the	applicable statutory filing re	Ocument is received to	or filing) ate will not	l be
4.	A description of occurrence t 605.0707, Florida Statutes, (co	hat resulted in the limite opy 605.0707 on back co	ed liability company's dis	solution pursuant	to section	1
	The occurrence that resulted inth	e limited liability company	y's dissolution were because	change inthe line b	ousiness	
	The occurrence that resulted inthe		_	·	ousiness	
					2021   DI	PT:
5.	If there are no members, enter activities and affairs:	r the name and address of Segundo Huaman	of the person appointed to	wind up the com	npandy's	
		1158 White Pine Dr. Well	lington, FL. 33414		P	
				11	<u>ω</u>	
6	Signature of an authorized pe	erson or if there are no m	nembers, the signature of	the person appoir	———— nted and li	isted
ab	pove to wind up the company's	activities and affairs:	Similar of	and person appoin		.5.00
	(Ce)	-	Segundo Huaman		-	
	Signature		Printed	Name		
		FILING F	EE: \$25.00			