

L19000304553

(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



700396448137

FILED
NOV - 1 AM 10:01
TALLAHASSEE, FL

11/01/22--01020--019 **25.00

2022 NOV - 1 PM 2:52

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

SLOTH MYA, LLC

Signature _____

Requested by: SETH

10/31/22

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

2022 NOV - 1 AM 10:01

SECRETARY OF STATE
TALLAHASSEE, FL

1. The name of a limited liability company is
SLOTH MYA, LLC

2. The Articles of Organization were filed on 12/19/2019 and assigned
document number L19000304553

3. The delayed effective date the dissolution if not effective on the date of filing: 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).

Pursuant to Florida Statutes Section 605.0701, all Members consented to and authorized the dissolution of the

Company. JOHN A. RIZZO was unanimously appointed by the Members to wind up the Company's

activities and affairs.

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: JOHN A. RIZZO

6574 N STATE ROAD 7, SUITE 201

COCONUT CREEK, FL 33073

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:

DocuSigned by:

John Rizzo

JOHN A. RIZZO

W4C6UE720AED4BZ2

Signature

Printed Name

FILING FEE: \$25.00

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: SLOTH MYA, LLC

Document number of Limited Liability Company is: L19000304553

Date of dissolution was: date of filing

Description of information that must be included in a written claim:

Amount of claim; date claim arose; name and address of claimant; and description of claim.

FILED
NOV - 1 AM 10:01
TALLAHASSEE, FL

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

DELOACH, P.L.

1206 EAST RIDGEWOOD STREET

ORLANDO, FL 32803

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

JOHN A. RIZZO

Printed Name of the Person Filing

DocuSigned by:

John Rizzo

14C60E720AED482

Signature of the Person Filing

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