L19000305817

(Requestor's Name)
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SECRETARY OF STATE

THE STATE OF THE S

COVER LETTER

TO:

Registration Section

Div	vision of Corporations				
SUBJECT:	Star Coffee Supply, LLC				
SUBJECT.	(Name of Limite	d Liability Comp	any)		
The enclosed	d Articles of Dissolution and fee(s) are submitte	ed for filing.			
Please return	all correspondence concerning this matter to t	he following:			
	Denise Charlez				
		e of Person)			
		,			
	Star Coffee Supply, LLC	/Company)			
		/Company)			
	5237 1st Road				
	(A	(ddress)			
	Lake Worth, FL 33467	<u></u>		207. SE	
	(City/State	e and Zip Code)		SECRETARY OF STALLAHASSEE	
r r	-fu-value asserting this matter alongs cally			Y 22	
ror turtner t	nformation concerning this matter, please call:			200 EE	
De	nise Charlez	561 at (202-5509)	26.60 10.00	
	(Name of Person)	(Area	Code & Daytime Telepho	ne Numbor)	
Enclosed is a	check for the following amount:			,	
≡ \$25	5.00 Filing Fee and Certificate of Dissolution		ng Fee, Certificate of Diss Copy (additional copy is		
Mailing Address: Registration Section Division of Corporations		Street Address: Registration Section Division of Corporations			
P.O. Box 6327		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			
T a	llahassee, FL 32314	– 2415 N. Mi	onroe Street, Suite	010	

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is
	Star Coffee Supply, LLC
2.	The Articles of Organization were filed on 12/16/2019 and assigned
	document number L19000305817
3.	The delayed effective date the dissolution if not effective on the date of filing: immediately (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).
	Has not and no longer genertaing money.
	SECRETA TALLA
5.	If there are no members, enter the name and address of the person appointed to wind up the complety's activities and affairs:
	m
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:
	Denise Charlez
	Signature Printed Name
	FILING FEE: \$25.00