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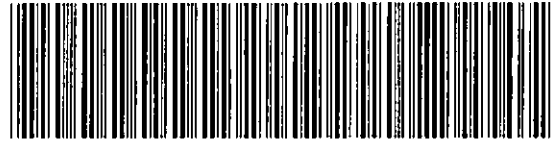
Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE

JAN - 9 2023

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2023 JAN -6 AM 9:33

SECRETARY OF STATE
TALLAHASSEE, FL



6 2011:44

**CORPORATE
ACCESS,
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When you need ACCESS to the world

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DISSOLUTION

1. EATFIGO LLC

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

COVER LETTER

TÖ: Registration Section
Division of Corporations

SUBJECT: EatFigo 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:

Robert Nappi
(Name of Person)

EatFigo LLC
(Firm/Company)

418 E 59th Street
(Address)

New York, NY 10022
(City/State and Zip Code)

For further information concerning this matter, please call:

Robert Nappi at (310) 294 - 4678
(Name of Person) (Area Code & Daytime Telephone Number)

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:

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

Street Address:

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

FILED
2023 JAN -6 AM 9:33
SECRETARY OF STATE
TALLAHASSEE, FL

1. The name of a limited liability company is

EatFigo LLC

2. The Articles of Organization were filed on DEC 30, 2019 and assigned

document number L20000006732

3. 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. 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).

Disillusion in favor of corporate structure

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

Robert Nappi

418 E 59th Street

New York, NY 10022

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:



Signature

Robert Nappi

Printed Name

FILING FEE: \$25.00