

L20 0000034448

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

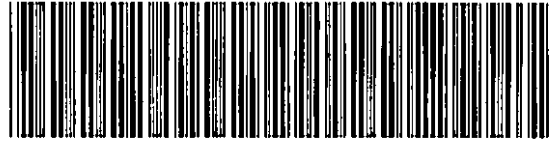
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/26/22--01008--009 **25.00

2022 SEP 26 PM 2:52
Filing Office

REC-26-2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Guallah Lucky Force 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:

Debra McKinney

(Name of Person)

Personal Representative, Estate of Gary Neal McKinney

(Firm/Company)

3650 Sand Court

(Address)

Mims, Florida 32754

(City/State and Zip Code)

For further information concerning this matter, please call:

Debra McKinney

(Name of Person)

321

704-5868

at (

(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**

2022 SEP 26 PM 2:52

1. The name of a limited liability company is

Gualah Lucky Force, LLC

2. The Articles of Organization were filed on 1/28/2020 and assigned

document number L20000034448

3. The delayed effective date the dissolution if not effective on the date of filing: 9/21/22
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).

Death of managing member

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

Debra McKinney, Personal Representative

Estate of Gary Neal McKinney

3650 Sand Court

Mims, Florida 32754

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:

Debra J. McKinney
Signature

Debra McKinney, Personal Representative
Printed Name

FILING FEE: \$25.00