

L200000052014

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

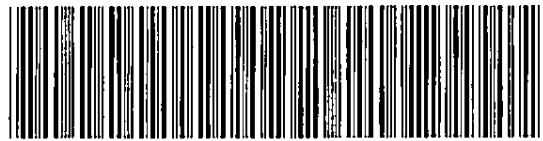
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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600420921346

12/28/23--01025--024 **55.00

FILED

2023 DEC 28 PM 12:58

SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations
GROUP TRI LLC

SUBJECT: _____
(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:

GUILLERMO WOLF

(Name of Person)

(Firm/Company)

16195 LAUREL DRIVE

(Address)

WESTON, FL. 33326 -1617

(City/State and Zip Code)

For further information concerning this matter, please call:

GUILLERMO WOLF

954

268-6321

(Name of Person)

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

1. The name of a limited liability company is
GROUPTREE LLC

2. The Articles of Organization were filed on 02/14/2020 and assigned
document number 120000052014

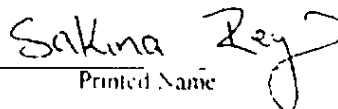
3. The delayed effective date the dissolution is not effective on the date of filing 11/30/2023
reflective date cannot be prior to or more than 90 days later than date document is received for filing.
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, 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)
OUT OF BUSINESS - THERE IS NO MORE ACTIVITY

5. If there are no members, enter the name and address of the person appointed to wind up the company
activities and affairs N/A

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

* 
Printed Name

FILING FEE: \$25.00

SECRETARY OF STATE
TALLAHASSEE, FL

2023 DEC 28 PM 12:58

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