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(Requestor's Name)			
(Address)			
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(City/	State/Zip/Phon	e #)	
PICK-UP	MAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificate	s of Status	
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Special Instructions to Filing Officer:			
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J. HORNE			
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1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE : 222160 7986366
HORIZATION : The Company of the Company AUTHORIZATION : COST LIMIT : \$ 25.00 ORDER DATE: December 20, 2023 ORDER TIME : 10:21 AM ORDER NO. : 222160-005 CUSTOMER NO: 7986366 DOMESTIC FILINGS NAME: PATTY, LLC XX __ ARTICLES OF DISSOLUTION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ____ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CORPORATION SERVICE COMPANY

CONTACT PERSON: Eyliena Baker - EXT#

COVER LETTER

O: Registration Section Division of Corporations		
PATTY, LLC		
	ited Liability Company)	
The enclosed Articles of Dissolution and fee(s) are submi	itted for filing.	
Please return all correspondence concerning this matter to	•	
SETH COHEN		
(Na	une of Person)	
PATTY, LLC		
(Fi	rm/Company)	
1002 E NEWPORT CENTER DRIVE	E, SUITE 200	
	(Address)	
DEERFIELD BEACH FL 33442		
(City/St	ate and Zip Code)	
for further information concerning this matter, please cal	1:	
KIM LEVERETTE	919 618-7011 at ()	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Inclosed 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:	Street Address:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303	

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

PATTY, LLC	ity company is	<u>ッ</u>
2. The Articles of Organizatio	n were filed on 2/21/202	20 and assigned
document number L200000	59443	_
3. The delayed effective date t (effective Note: If the date inserted in t listed as the document's effective date to the document's	date cannot be prior to or mothis block does not meet th	ore than 90 days later than date document is received for tiling) e applicable statutory filing requirements, this date will not
4. A description of occurrence 605.0707, Florida Statutes, (that resulted in the limi	ted liability company's dissolution pursuant to section cover letter).
	_,,	STATED AS A FL DOMESTIC IN ERROR
	ter the name and address	TATED AS A FL DOMESTIC IN ERROR s of the person appointed to wind up the company's
activities and affairs:	SETH COHEN	
 Signature of an authorized pabove to wind up the company 	person or if there are no sactivities and affairs:	members, the signature of the person appointed and lis
Seth Cohen		SETH COHEN
Signature		Printed Name

FILING FEE: \$25.00