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COVER LETTER

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TO:			ions				
SUBJ	ECT:		964	ω	CORNE	De,	LLC
				(Nam	e of Limited L	iability Com	pany)
						_	
Please	return all	corresponaen	ice conceri	ning this	matter to the i	onowing:	
			JAMES	, I	Name of	Person)	
TO: Registration Section Division of Corporations SUBJECT: 964 W Corace De 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: Takes Defaque							
786年 P. 800 E. (Address)							
SHERDAN IN 46 069 (City/State and Zip Code)							
For fu	rther infor	mation conce	rning this I	matter, p	olease call:		
		Jamas	DOFA	صديا		at (3 \7	947-0557
		(Na	ime of Perso	on)		(Area	Code & Daytime Telephone Number)
Enclose	ed is a checl	k for the follow	ving amoun	t:			
)	≾\$ 25.00 F	Filing Fee and C	Certificate o	of Dissolı	ution		
	Regist Division P.O. B	ration Section of Corposox 6327	orations			Registration of The Centre 2415 N. M.	on Section of Corporations e of Tallahassee flonroe Street, Suite 810

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	A LIMITED LIABILITY COMPANY	
1.	The name of a limited liability company is 964 w Corre DR, LLC	War.
2.	The Articles of Organization were filed onand assigned	
	document number LZ0000086751	
3.	The delayed effective date the dissolution if not effective on the date of filing: 12/3: 2024 (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).	
	Selling of the property AT 964 W. GORRIE DR. St. CEORGE JSLAND, FL.	
	no larger needed	
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:	
	JAMES DEFALQUE	
	7867 N. 80 E.	
	SHER. DAN, IN 46069	
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed bove to wind up the company's activities and affairs:	
	Signature Printed Name	

FILING FEE: \$25.00