

KZO 000087176

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

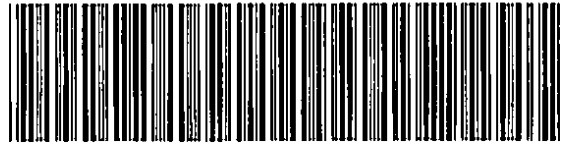
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/04/21--01018--009 **35.00

FILED
2021 JUN -4 AM 7:06
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pentacle LLC

DOCUMENT NUMBER: L20000087176

The enclosed **Notice of Limited Liability Company Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jaime M. Batista

(Name of Contact Person)

Pentacle LLC

(Firm/Company)

10715 Tabor dr

(Address)

Tampa FL 33625

(City/State and Zip Code)

For further information concerning this matter, please call:

Jaime M. Batista

(Name of Contact Person)

at (813)

(Area Code)

4204487

(Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy
(Additional copy is enclosed)

☐ \$60 Filing Fee,
Certificate of Status & 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

Notice of Limited Liability Company Dissolution

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "*Notice of Limited Liability Company Dissolution*" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: Pentacle LLC

Document number of Limited Liability Company is: L20000087176

Date of dissolution was: 09/01/2021

Description of information that must be included in a written claim:

The liquidation of the company Pentacle LLC was proceeded where the administrator left
the position and power of representation in charge of distributed the remaining capitol stock
them analyzed and paid part of debts with third paties. We had to make de definitive closure
of the company due to the lack of workers and the impact of the covid 19 virus.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Florida Department of State

The Centre of tallahassee

2415 N. Monroe st, suite 810

Tallahassee, FL 32303

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Jaime M. Batista

Printed Name of the Person Filing

Jaime Batista
Signature of the Person Filing