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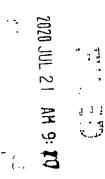
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COVER LETTER

TO: Registration Section Division of Corporations	
TREE ARMY LLC	
SUBJECT: (Name of Limi	ted Liability Company)
The enclosed Articles of Dissolution and fee(s) are submi	tted for filing.
Please return all correspondence concerning this matter to	the following:
ADRIAN MIDDLETON, ESQ	
(Na	me of Person)
(Fit	rm/Company)
1437 MARKET ST	
	(Address)
TALLAHASSEE FL 32312	
(City/St	rate and Zip Code)
For further information concerning this matter, please cal	l:
ADRIAN MIDDLETON ESQ	850 815 0256
(Name of Person)	(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:	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

١.	The name of a limited liability company is TREE ARMY LLC
2.	The Articles of Organization were filed on $\frac{3/26/20}{2}$ and assigned
	document number 1.20000090958
3.	The delayed effective date the dissolution if not effective on the date of filing: (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).
	605.0707, Florida Statutes, (copy 605.0707 on back cover letter). CLOSED BUSINESS
	CLOSED BUSINESS 2
	CLOSED BUSINESS BUSIN
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
6. at	Signature of an authorized person or if there are no members, the signature of the person appointed and listed pove to wind up the company's activities and affairs:
	Holen Salarina Keiza
	Signature Printed Name

FILING FEE: \$25.00

<u>AFFIDAVIT</u>

I, SABRINA ARIZA, will allow anyone from this day forward, July 20, 2020, to use the name
"TREE ARMY LLC" that is currently in use by the Florida LLC with the Document #L20000090958

SARRIA KRIZA

NAME

SIGNATURE

4.20.20

DATE