120000093429

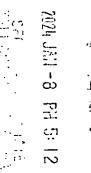
(Re	equestor's Name)						
(Ad	ldress)						
(Ad	ldress)						
(City/State/Zip/Phone #)							
PICK-UP	MAIT	MAIL MAIL					
(Bu	isiness Entity Nan	ne)					
(Document Number)							
Certified Copies	_ Certificates	of Status					
Special Instructions to Filing Officer:							
	Mils						

Office Use Only



200421069042

01/08/24--01015--017 **25.00



COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Custom Papers LLC			
(Name of Limi	ted Liability Company)		
The enclosed Articles of Dissolution and fee(s) are submit Please return all correspondence concerning this matter to	-		
Anna Popielarz			
(Na	me of Person)		
· · · · · · · · · · · · · · · · · · ·			
(Fir	m/Company)		
7090 Mamouth St	(4.11)		
	(Address)		
Englewood, FL 34224 (City/St	ate and Zip Code)		
(City) Si	are and Lip Gode)		
For further information concerning this matter, please call	! :		
Anna Popielarz	at (312) 927-0949 (Area Code & Daytime Telephone Number)		
(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	Registration Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		
1 ananassee, 1 L 32314	Tallahassee, FL 32303		

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

١.	The name of a limited liabil	ity company is					
	CUSTOM PAPERS LLC					•	
2.	The Articles of Organization	n were filed on March 30,	2020	and assig	gned		
	document number 920A000	07105	-				
3.	The delayed effective date t (effective Note: If the date inserted in t listed as the document's effective date to the delayed of the date inserted in the listed as the document's effective date to the delayed of the	date cannot be prior to or more his block does not meet the	than 90 days later than applicable statutory fil	date document is r	received for s, this date	· filing) e will no	t be
4.	A description of occurrence 605.0707, Florida Statutes, (that resulted in the limite copy 605.0707 on back c	d liability company' over letter).	's dissolution p	ursuant to	o section	n
	Creative writing services have	been largely replaced with	Al technologies and ar	e no longer			
	a viable service to offer.				TAIL	202h J	
					:-,! -::!	==:	7
						-18 Pi-1	
5.	If there are no members, ent	er the name and address	of the person appoin	ted to wind up	the comp	pany 's'	
	activities and affairs:	Anna Popielarz				;, ~	
		7090 Mamouth St					
		Englewood, FL 34224					
6. ab	Signature of an authorized pove to wind up the company	person or if there are no messactivities and affairs:	embers, the signatur	re of the persor	appointe	ed and l	isted
	lli		ANNA POPIELARZ				
Signature			Pri	inted Name			

FILING FEE: \$25.00