## 120000118242

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
<u></u>					
Special Instructions to Filing Officer:					
Q. SILAS					
JUN 16 2022					

Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FL

## **COVER LETTER**

	tration Section ion of Corporations						
a	BTK Innovations, LLC						
(Name of Limited Liability Company)							
The enclosed A	Articles of Dissolution and fee(s) are submit	ned for filing.					
Please return a	ll correspondence concerning this matter to	the following:					
	Harrell G Downey						
	(Nai	me of Person)					
BTK Innovations, LLC							
(Firm/Company)							
	5568 Wodbine Rd PMB 730						
(Address)							
	Pace, FL 32571						
	(City/Sta	ate and Zip Code)					
For further info	ormation concerning this matter, please call	:					
Harre	ell G Downey	850 994-6221					
	(Name of Person)	at ()					
Enclosed is a ch	eck 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: Registration Section		Street Address: Registration Section					
Divis	sion of Corporations	Division of Corporations					
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810					
		Tallahassee, FL 32303					

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

1.	The name of a limited liability company is BTK Innovations, LLC	S		SECRETARY OF STATE TALLAHASSEE, FL			
2.	The Articles of Organization were filed or	5/1/2020 		and assigned			
	document number L20000118242		<u></u>				
3.	The delayed effective date the dissolution if not effective on the date of filing: 4/30/22  (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 605.0707, Florida Statutes, (copy 605.070	in the limite 7 on back o	ed liability company over letter).	y's dissolution pursuant to section			
	Business Closed, Inactive.						
	Business Closed, Inactive,						
	Business Closed. Inactive.	+					
5.	If there are no members, enter the name a	nd address	of the person appoi	nted to wind up the company's			
	activities and affairs:		-11-				
		·····	-				
			- <u>-</u>				
6. al	Signature of an authorized person or if the pove to wind up the company's activities at	ere are no r nd affairs:	nembers, the signat	ure of the person appointed and listed			
	100	18.22	Harrell G Downey				
	Signature	14'	•	rinted Name			
	( ) 0	FILING E	FEE: \$25.00				