LZO 000 137486

(Reque	stor's Name)	
(Addres	s)	
(Addres	s)	
(City/Sta	ate/Zip/Phone	e #)
PICK-UP] WAIT	MAIL
(Busine	ss Entity Nan	ne)
(Docum	ent Number)	
Certified Copies	Certificates	of Status
Special Instructions to Filin	g Officer:	<u></u>

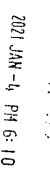
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01/04/21--01007--025 **25.00

S. YOUNG



COVER LETTER

TO: Registration Section Division of Corporations				
234	110			
SUBJECT: (Name of Limited Liability Company)				
(
The enclosed Articles of Dissolution and fee(s) are sub-	mitted for filing.			
Please return all correspondence concerning this matter	to the following:			
MARKLE	F TATE			
(Name of Person)				
234110				
(Firm/Company)				
(15.0				
618 COCOH I	SLES BLYD			
	(Address)			
COCOA BE	ACH, FL. 32931			
(City	/State and Zip Codc)			
For further information concerning this matter, please	call:			
MARY IFF TATE	at (321) 258-4049			
(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	The Centre of Tallahassee			
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810			
, —	Tallahassee, FL 32303			

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability of	ompany is 234 LLC		
2.	The Articles of Organization we	re filed on $\frac{5/20/20}{}$ and assigned		
	document number <u>L 2000</u>	00137486		
3.	(effective date Note: If the date inserted in this b	issolution if not effective on the date of filing: cannot be prior to or more than 90 days later than date document is received for filing) lock does not meet the applicable statutory filing requirements, this date will not be date on the Department of State's records.		
4.	A description of occurrence that 605,0707, Florida Statutes, (cop	resulted in the limited liability company's dissolution pursuant to section 605.0707 on back cover letter).		
		WAS NO LONGER NEEDED, NEVER USED,		
5.	TRANSACTED If there are no members, enter t	TR APPLIED FOR, NO BANK OPENED. NO BUSINESS the name and address of the person appointed to wind up the company's MARK LEF THE		
	activities and affairs:	618 COCOR ISTES BLVD		
	_	COCOA BRACH, FL. 32931		
	_	COCONDITION, I C. 02101		
6. at	Signature of an authorized persove to wind up the company's a	on or if there are no members, the signature of the person appointed and listed ctivities and affairs:		
	Mar atte	MARKLEE TATE		
	Signature	Printed Name		
FILING FEE: \$25.00				