h20000211315

(Requestor's Name)				
(Address)				
,				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



000389429590

08/15/22--01011--014 **25.00



The

COVER LETTER

Registration Section

TO:

Divi	sion of Corporations				
SUBJECT:	6342 LAMBERT LANE, LLC				
(Name of Limited Liability Company)					
Th	Anialan of Dissalution and Sac(a) and submit	and for filling			
i ne enciosed	Articles of Dissolution and fee(s) are submit	acd for timig.			
Please return	all correspondence concerning this matter to	the following:			
	DANIELLE PEYNADO				
	(Nai	ne of Person)			
	BRICK BUSINESS LAW, P.A.				
	(Firm/Company)				
	3413 W FLETCHER AVE				
	(Address)				
	TAMPA, FLORIDA 33618				
	(City/Sta	ate and Zip Code)			
For further in	formation concerning this matter, please call	:			
DA	NIELLE PEYNADO	813	816-1816		
	(Name of Person)	(Area Co	xde & Daytime Telephone Number)		
Enclosed is a	check for the following amount:				
■ \$25.00 Filing Fee and Certificate of Dissolution			Fee, Certificate of Dissolution & lopy (additional copy is enclosed)		
	iling Address:	Street Address			
Registration Section Division of Corporations		Registration Division of 0			
). Box 6327	Division of Corporations The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Moi Tallahassee,	nroe Street, Suite 810 FL 32303		

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability of 6342 LAMBERT LANE, LLC	company is	
2. The Articles of Organization w	ere filed on 07/20/2020	and assigned
document number L200002113		
Note: If the date inserted in this	dissolution if not effective on the date cannot be prior to or more than 90 days lablock does not meet the applicable state date on the Department of State's reco	utory filing requirements, this date will not be
4. A description of occurrence tha 605.0707, Florida Statutes, (cop	it resulted in the limited liability corry 605.0707 on back cover letter).	mpany's dissolution pursuant to section
Upon The Occurrence Of An Even	nt Described In s.605.0701(2), The Con	sent Of All Members.
	Described In s.605.0701(2), The Cons	71 S S S S S S S S S S S S S S S S S S S
	the name and address of the person	→
activities and affairs:		INRY OF STATE
6. Signature of an authorized pers above to wind up the company's a	on or if there are no members, the sectivities and affairs:	signature of the person appointed and listed
Signature	MARK JAC	OBY Printed Name
SIGHALUIC		TIMEGI IVAINE

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

MARK JACOBY

Printed Name of the Person Filing

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.

Document number of Limited Liability Company is: L20000211315	
Date of dissolution was: JULY 1, 2022	
Description of information that must be included in a written claim:	
DATE OF EVENT, NAME OF PARTIES, AMOUNT OF CLAIM; DESCRIPTION	ON OF CLAIM
CONTACT TELEPHONE NUMBER AND EMAIL ADDRESS	9022 FALL
ALL SUPPORTING DOCUMENTS FOR THE CLAIM	A SUE
	N 15
	£ € 1
Mailing address where claims can be sent: (Claims cannot be sent to the D	ivision of Corporations)
6342 LAMBERT LANE, LLC	
C/O KEVIN BRICK, ESQ.	
BRICK BUSINESS LAW, P.A.	
3413 W FLETCHER AVE, TAMPA FLORIDA 33618	

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00

Signature of the Person Filing