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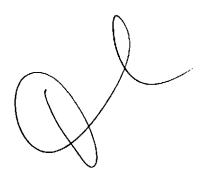
(Requestor's Name)			
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PICK-UP WAIT MAIL			
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COVER LETTER

Divisio	ration Section on of Corporations		
SUBJECT: _	ar-Ha Ellen Johnsto (Name of Limited I	iability Company)	5, L
The enclosed A	articles of Dissolution and fee(s) are submitted	for filing.	
Please return al	l correspondence concerning this matter to the	following:	
	Martha Ellen (Name o	Johnston f Person)	η_{G}
	(Firm/C	ompany)	
	20718 Park AV		 .: .:
	Dunnellon Fl (City/State a	3443 1 and Zip Code)	r : 33
For further info	ormation concerning this matter, please call:	•	
$\overline{\mathbb{U}}$	arthatlen Johnstor (Name of Person)	at (352) 445-562 (Area Code & Daytime Telephone Number)	<u>+</u>
	eck for the following amount: 0 Filing Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)	
Regi Divi P.O.	ing Address: istration Section sion of Corporations Box 6327 ahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32314

2-7-23 CR # 1816/enclosed

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is Martha Ellen Johnston's Sidekick Services LLC
2. The Articles of Organization were filed on 19-16-20-0 and assigned
document number 403000001030
3. The delayed effective date the dissolution if not effective on the date of filing: 2-1-2025 (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).
I lost my job in the pandemic
so I was gonna have my own business.
"Never" used it and started working for
Somebody else. Still with that job
5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: Martha Johnston
20718 Park Ave
Dunnellon Fl 34431
6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs: