L20000248174

(Re	equestor's Name)	
(Ac	ddress)	"
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PICK-UP	MAIT	MAIL
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DIVISION OF CORPORATIONS

'JUL 1 2 2021 R. HUNT

COVER LETTER

TO:

Registration Section

Division of Corporations		
SUBJECT: AEGIS GLOGAI (Name of Limite	Solvions LLC d Liability Company)	
The enclosed Articles of Dissolution and fee(s) are submitted. Please return all correspondence concerning this matter to t		
JAMSS K. HOGAN S	A e of Person)	
JAMES K HOSAN ESQ (Firm/Company)		
6 JUDITH CT (Address)		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
JOMES 16 HOSAN SA. (Name of Person)	at (
Enclosed is a check for the following amount:		
Z \$25.00 Filing Fee and Certificate of Dissolution PLACEOUSLY (NOVILLE)	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810	

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is AEGIS GLOBAL SOLTIONS LCC
2.	The Articles of Organization were filed on $\frac{7/29/20}{}$ and assigned
	document number <u>L200002(817</u> 4
3.	The delayed effective date the dissolution if not effective on the date of filing: 2 (1/202/ (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). FINANCIALLY NOT AKIS TO LOWINGE
	Ci.
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs: SHMES (C FLOGRA), SH -
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:
	JAMES K. HOLAN Printed Name
	FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

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.

Name of Limited Liability Company:
Document number of Limited Liability Company is: L20000248174
Date of dissolution was: FEB 1, 2021
Description of information that must be included in a written claim:
DATE THAT CLAIM AROSE - NOVE
NATURE OF THE CLAIM
A DESCRIPTION OF THE DAMAGES CLAIMED
NOME OF PERSON AT AEGIS THE CLAIMANT DEALT WITH
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) JAMES K. HOGAN, 6 JUDITH COURT, ROCKY POINT, NY 11778
A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim i commenced within 4 years after the filing of this notice. JAMES K. HOGAN, SR Printed Name of the Person Filing Signature of the Person Filing
Timed Name of the Ferson Filing Signature of the Ferson Filing