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<u>-</u> .	(Requestor's Name)	

(Address) (Address) (City/State/Zip/Phone #) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:
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**FILED** 2021 JUN-8 PH 2: 53 SECRETARY OF STATE TALLAHASSEE, FI

Office Use Only

Dr. Zia Fatemi	
	ame of Person)
(F)	irm/Company)
758 N Sun Drive, Ste 104	
	(Address)
Lake Mary, FL 32746	
(City/S For further information concerning this matter, please ca	itate and Zip Code) II:
Dr. Zia Fatemi	407 448-1258
(Name of Person) Enclosed is a check for the following amount:	(Area Code & Daytime Telephone Number)
<b>X\$25.00</b> Filing Fee and Certificate of Dissolution	[2] \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)
Mailing Address:	Strunt Address

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

SUBJECT: \_\_\_\_\_

Registration Section Division of Corporations

FZF Investment Club LLC

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## **COVER LETTER**

(Name of Limited Liability Company)

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is FZF Investment Club LLC

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2. The Articles of Organization were filed on 08/21/2020 and assigned

document number L20000260457

3. The delayed effective date the dissolution if not effective on the date of filing: (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 n

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).

The LLC never started operations and has been closed.	TA TA
The LLC never started operations and has been closed.	RETA.
The LLC never started operations and has been closed.	

 If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

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:

Signatu

Zia Fatemi

Printed Name

FILING FEE: \$25.00

