

L20000292712

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

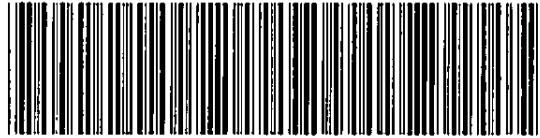
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
APR 25 2024

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200427389382

04/15/24--01004--005 **25.00

FILED
2024 APR 15 PM 12:28
J. HORNE
APR 25 2024

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SEF ACQUISITIONS LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Shari Fields

(Name of Person)

SEF Acquisitions LLC

(Firm/Company)

6072 Via Silvanus

Delray Beach

(Address)

Delray Beach FL 33484

(City/State and Zip Code)

For further information concerning this matter, please call:

ShariFields

(Name of Person)

516

at ()

695-6636

(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:

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**

FILED
2024 APR 15 PM 12:28
SECRETARY OF STATE
FLORIDA

1. The name of a limited liability company is

SEF Acquisitions LLC

2. The Articles of Organization were filed on September 17, 2020 and assigned

document number L20000292712

3. The delayed effective date the dissolution if not effective on the date of filing: June 1, 2024
(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).

Not a functioning company

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Shari Fields, 846 Park Place West Palm Beach FL 33401

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:

Shari Fields

Signature

Shari Fields

Printed Name

FILING FEE: \$25.00