

L20000304590

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

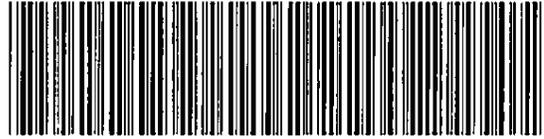
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100411490701

FILED

2023 JUL 20 AM 10:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

2023 JUL 20 PM 01:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 7/20/23

****WALK IN****

ENTITY NAME 105 LLC

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

 Plain Copy
X X X Certified Copy
 Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

 Certified Copy of Arts & Amendments
 Certified Copy of Arts & Amendments Complete File (Including Annual Reports)
 Certificate of Status
 Certificate of Status Reflecting: _____

****APOSTILLE / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$ 55.00

ACCOUNT # 120140000108
United Corporate
Services, Inc.

Keith Kappan

Please call Tina at the above number for any issues or concerns. Thank you so much!

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

1. The name of a limited liability company is
105 LLC

2023 JUL 20 AM 10: 43

2. The Articles of Organization were filed on October 5, 2020

and assigned

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

document number L20000304590

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 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 consent of the sole member of the limited liability 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:

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:


Signature

Craig Loverock

Printed Name

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

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: 105 LLC

Document number of Limited Liability Company is: L20000304590

Date of dissolution was: July 20, 2023

Description of information that must be included in a written claim:

Name of claimant, contact information for claimant, amount of claim, circumstances giving rise to the purported claim, statutory basis for the purported claim.

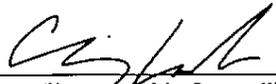
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporation

155 Pony Drive
Newmarket, Ontario L3Y 7B5 Canada

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Craig Loverock
Printed Name of the Person Filing


Signature of the Person Filing

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