## 0316 42

(Requestor's Name)  (Address)	800391507038
(Address)	
(City/State/Zip/Phone #)	LLC dissolut
PICK-UP WAIT MAIL	
(Business Entity Name)	07/27/2201002000 **25
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	ALI AHASSE
	ASSET !

Office Use Only

A. RAMSEY JUL 27 2022

2022 JUL 26 PH 4: 3/122 JUL 26 AH 10: 20

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## . COVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations	
SUBJECT: Justin' Time Legal 1	Analyst LL (
(Name of Limite	ed Liability Company)
The enclosed Articles of Dissolution and fee(s) are submitt	ed for filing.
Please return all correspondence concerning this matter to	the following:
Benyanna Barber	ne of Person)
Justin'Time Lega	Analyst LLC
7200 Clinton Hud	son Sr. Ln
Tallahassee / FL	32305
(City/Star	te and Zip Code)
For further information concerning this matter, please call:	
Benyanna Barber	at ( <u>880</u> ) <u>815-1130</u>
(Name of Person)	(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:	Street Address:
Registration Section Division of Corporations	Registration Section Division of Corporations
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The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

	The name of a limited liability company is  AM 10: 20
1.	The name of a limited liability company is  Justin' Time Legal Analyst LLC
2.	The Articles of Organization were filed on 10/04/2020 and assigned
	document number <u>L 20000316497</u>
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).
	Disagreements between partners No longer communicating.
5	If there are no members, enter the name and address of the person appointed to wind up the company's
٠.	activities and affairs: Renyanna Barber
	7250 Unton Hudson Sr. Ln
	Tallassee, FL 32305
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed bove to wind up the company's activities and affairs:
9	<u>Lemyarna Barber</u> Signature  Renyanna Barber Printed Name

**FILING FEE: \$25.00**