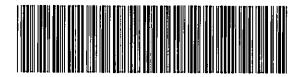
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	(Requestor's Name)
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PICK-UP	WAIT MAIL
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Certified Copies	Certificates of Status
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## COVER LETTER

TO:

Registration'Section

Tallahassee, FL 32314

Division of Corporations	
SUBJECT: Capital Eity (Name of Limited)	Engineely LLC Liability Company
The enclosed Articles of Dissolution and fee(s) are submitted	for filing.
Please return all correspondence concerning this matter to the	e following:
<u>Capital</u> C	of Person)  Lity Engineers LLC  Company)  Tage Park Blvd
(XO	Slæs $FL$ 323/1 and Zip Code)
For further information concerning this matter, please call:	
TONY ALEX (Name of Person)	at ( 450) 591 051 2 (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	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

Ì,	The name of a limited liability company is	
	CAPITAL CITY ENGINEERS LLC	
2.	The Articles of Organization were filed on $\frac{11}{30/2020}$ and assigned	
	document number <u>L 2 0000 37</u> 36 5 6	
3.	The delayed effective date the dissolution if not effective on the date of filing: 11/27/2020 (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.	e
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to seotion 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).	
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		<u></u>
		_
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:	
	<del></del>	
5. 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:	ed
	2/7/2022	
_	Wsignature Printed Name	

FILING FEE: \$25.00