

L21000011255

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

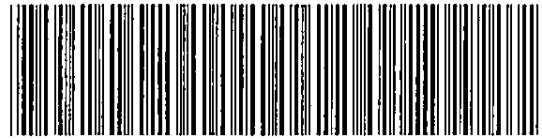
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**DATE: 01/08/2025**

**NAME: OWS INVESTMENTS. L.L.C.**

**TYPE OF FILING: DISSOLUTION**

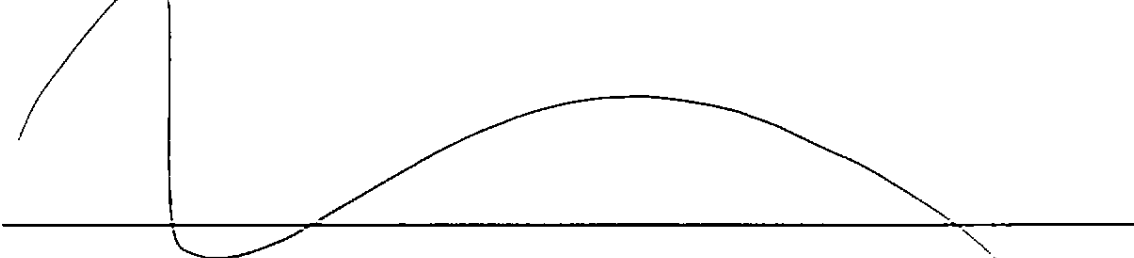
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**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**

A handwritten signature in black ink, appearing to read 'ABBIE/PAUL HODGE', is written over a horizontal line. The signature is stylized, with a large, sweeping loop that extends to the right and then curves back down to the line.

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: OWS INVESTMENTS, L.L.C.  
\_\_\_\_\_  
(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:

KERRY ANNE SCHULTZ

\_\_\_\_\_  
(Name of Person)

SCHULTZ LAW GROUP, L.L.C.

\_\_\_\_\_  
(Firm/Company)

2777 GULF BREEZE PKWY.

\_\_\_\_\_  
(Address)

GULF BREEZE, FL 32563

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

KERRY ANNE SCHULTZ

\_\_\_\_\_  
(Name of Person)

850

754 1600

at ( )

\_\_\_\_\_  
(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  
2025 JAN -8 PM 12:42  
JAN 8 2025

1. The name of a limited liability company is  
OWS INVESTMENTS, L.L.C.

2. The Articles of Organization were filed on 01/13/2021 and assigned  
document number L21000011255

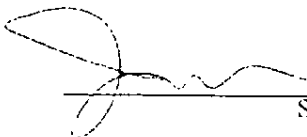
3. The delayed effective date the dissolution if not effective on the date of filing: \_\_\_\_\_  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, 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).

No longer needed

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

James A. Wick  
Printed Name

FILING FEE: \$25.00