

L21000035704

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

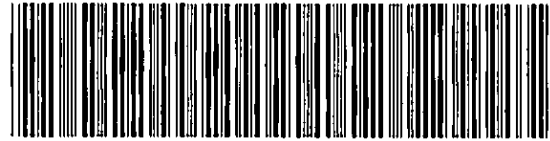
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300387225643

05/06/22--01013--014 **190.00

RECEIVED

FILED

2022 MAY -6 AM 10:20

2022 MAY -6 PM 12:06

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

STATE
TALLAHASSEE, FL

(6
5/6

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Savi X Visuals, 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:

EARLYSSIA Austin
(Name of Person)

(Firm/Company)

621 CEDAR PARK DR
(Address)

Daytona Beach, FL 32114
(City/State and Zip Code)

For further information concerning this matter, please call:

EARLYSSIA Austin at (813) 324-5334
(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:

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 6, 2022

EARLYSSIA AUSTIN

SUBJECT: SAVI X VISUALS, LLC
Ref. Number: L21000035704

We have received your document for SAVI X VISUALS, LLC and your check(s) totaling \$190.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 422A00010492

RECEIVED
2022 MAY -6 AM 11:53
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

2022 MAY -6 PM 12:06

1. The name of a limited liability company is

Savi X Visuals, LLC

SEC. STATE
TALLAHASSEE, FL

2. The Articles of Organization were filed on 01/19/2021 and assigned

document number L21000035704

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).

Filing a Corporation

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:

Earlyssia Austin
Signature

Earlyssia Austin
Printed Name

FILING FEE: \$25.00