121000049838

(Requestor's Name)				
(Address)				
(Address)				
(Addiess)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Dusiness Littly Name)				
(Document Number)				
Certified Copies Certificates of Status				
				
Special Instructions to Filing Officer:				

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FILED
2022 MAY 24 AM 8: 51
SELRETARY OF STATE
STATE AHASSEE. FL

COVER LETTER

TO: Registration Sec Division of Cor			ζ		
SUBJECT: Contress Direct Florida LhC (Name of Limited Liability Company)					
The enclosed Articles of	Dissolution and fee(s) are submit	ted for filing.			
Please return all correspo	ondence concerning this matter to	the following:			
	Mark Roner	he of Person)			
(Firm/Company)					
ILAI E. Central Avc (Address)					
(Address)					
Merritt Island Fz 32952 (City/State and Zip Code)					
For further information concerning this matter, please call:					
Mark	Roney	at (321) 626 - 1021 (Area Code & Daytime Telephone Number)			
Enclosed is a check for the f		(Area Code & Daytime Telephone Number) ☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)			
Mailing Address Registration S Division of C P.O. Box 632	section orporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

1.	The name of a limited liability company is	2022 MAY 24 AM 8: 54
	GUTTERS DIRECT Florida LLC	SECUCIAS
2.	The Articles of Organization were filed on	SECULIART OF STATE TALL AHASSEE. FL
	document number <u>L210000 49838</u>	
3.	The delayed effective date the dissolution if not effective on the date of (effective date cannot be prior to or more than 90 days later tha Note: If the date inserted in this block does not meet the applicable statutory listed as the document's effective date on the Department of State's records.	n date document is received for filing)
4.	A description of occurrence that resulted in the limited liability compan 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).	y's dissolution pursuant to section
	Business closed 12-31-2021	
5.	If there are no members, enter the name and address of the person appoactivities and affairs:	nted to wind up the company's
6. ab	Signature of an authorized person or if there are no members, the signat ove to wind up the company's activities and affairs:	ure of the person appointed and listed
	May Marki	Roney
	Signature	rinted Name

FILING FEE: \$25.00