## L21000088182



(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



100438110731

10/22/24--01011--011 \*\*25.00



## **COVER LETTER**

TO:	Registration Section Division of Corporations					
SUBJI	Meaning-Centered Leadership					
		nited Liability Company)				
The en	sclosed Articles of Dissolution and fee(s) are subm	nitted for filing.				
Please	return all correspondence concerning this matter	to the following:				
	Clyde E. Jackson					
	4)	Name of Person)				
	Meaning-Centered Leadership					
	(Firm/Company)					
	3104 Dune Coast Pl.					
		(Address)				
	Viera, FL 32940					
	(City/	State and Zip Code)				
For fu	ther information concerning this matter, please ca	all:				
	Clyde Jackson	209 410-3493 at ()				
	(Name of Person)	(Area Code & Daytime Telephone Number)				
Enclose	ed is a check for the following amount:					
i	■ \$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				
	P.O. Box 6327	The Centre of Tallahassee				
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

I. The name of a limited lia	ibility company is				
Meaning-Centered Leaders	hip			·	
. The Articles of Organiza	tion were filed on 02/22/202	I and	assigned		
document number 1.2100	00881182	-			
Note: If the date inserted	arve mare carmor of brior to or more	tive on the date of filing: date than 90 days later than date docume applicable statutory filing require of State's records.	m is foccive	xl for filing) date will not l	
. A description of occurre	nce that resulted in the limiters, (copy 605,0707 on back co	d liability company's dissoluti	on pursua	nt to section	
The LLC is no longer gener		er icuci).			
. If there are no members,	enter the name and address of	of the person appointed to wind	l up the co	ompany's	
activities and affairs:	Clyde E. Jackson		<del>-</del> -	<u> </u>	
	3104 Dune Coast Pl.			·	
	Viera, FL 32940		<u> </u>	<del></del>	
. Signature of an authorize bove to wind up the compa	ed person or if there are no meany's activities and affairs:	embers, the signature of the po		pinted and lis	
Signature		Clyde E. Jackson  Printed Name			
/ Signature		rimeu Name			

FILING FEE: \$25,00