

121000 158936

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

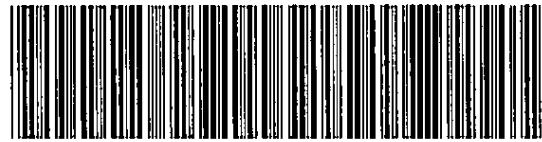
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900377657909

12/27/21--01085--006 ***75.00

2021 DEC 27 PM 2:39
SECRETARIAL OF STATE
TALLAHASSEE, FL
FILED

FILED

Dissolution

JAN 05 2022

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Coat of Arms, 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:

Ovidio M. Gonzalez, BSIE
(Name of Person)

The Coat of Arms, LLC
(Firm/Company)

2665 S. Bayshore Dr #720-17
(Address)

Coconut Grove, FL 33133
(City/State and Zip Code)

For further information concerning this matter, please call:

Ovidio Gonzalez, BSIE-786 Listed
(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)

2021 DEC 27 PM 2:39

FILED
FBI
FD

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

1. The name of a limited liability company is

The Coat of Arms, L.L.C.

2. The Articles of Organization were filed on

4/16/2021

and assigned

document number L21000158936

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).

Change of company

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Ovidio M. Gonzalez, BSIE

2021 DE 16 27
SEARCHED
INDEXED
FILED
SERIALIZED
OCT 12 2021
FBI - MIAMI
FBI - MIAMI

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:

Ondio M. Gonzalez, BSIE
Signature

Ondio M. Gonzalez, BSIE
Printed Name

FILING FEE: \$25.00