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(Requestor's Name)	
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PICK-UP WAIT MAIL	
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(Document Number)	
Certified Copies Certificates of Status	
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04/07/22--01012--022 \*\*25.00



## **COVER LETTER**

Division of Corporations	
SUBJECT: AZGLOMMETIC	1 LLC
(Name of Limite	d Liability Company)
The enclosed Articles of Dissolution and fee(s) are submitted	ed for filing.
Please return all correspondence concerning this matter to t	he following:
JUSTIN PLA	ttzek
(Num	e of Person)
N/A	√Company)
131 Fishermans	Way
131 Fishermans	10a 33477
(City/Stat	e and Zip Code)
For further information concerning this matter, please call:	
JUSTIN Platzes (Name of Person)	at (SOH) 30-0574 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	(Area Code & Daytine Telephone Number)
\$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
P.O. Box 6327	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

I.	The name of a limited liability company is  A COMMO(0)  LLC			
2.	The Articles of Organization were filed on $\frac{49300}{300}$ and assigned			
	document number <u>L31000165394</u>			
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).			
	Unfortunatery walnut closed store used			
	to sell products online.			
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:			
	131 Fuhamans Way			
	Jupite FL 33477			
6 al	Signature of an authorized person or if there are no members, the signature of the person appointed and listed bove to wind up the company's activities and affairs:			
	Signature J-STIN Plûtzes Printed Name			
	Signature Printed Name			

FILING FEE: \$25.00