L21000175491

(R	equestor's Name))
(A	ddress)	
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(C	ity/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
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(Document Number)		
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A. RIVERS MAY 1 3 2023

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: WPTH LLC (Name of Limited	Liability Company)	
The content being a fixed size of the content of th		
The enclosed Articles of Dissolution and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the	following:	
Charles Peters	of Person)	
WPT H LLC (Firm/Company)		
(Firm/Company)		
14519 Eagle PT.	Dr.	
Clearwater [].	33762 and Zip Code)	
For further information concerning this matter, please call:		
(Name of Person)	at (<u>)17</u>) <u>510 – 53 99</u> (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	,	
\$\times \$\section \text{S25.00 Filing Fee and Certificate of Dissolution}	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)	
Mailing Address: Registration Section	Street Address: Registration Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is
2. The Articles of Organization were filed on April 22, 21 and assigned
document number <u>L21000175491</u>
3. The delayed effective date the dissolution if not effective on the date of filing: 12-21-22 (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).
Company never did any business in The
past nor will it in the future. Not
noeded!
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
14519 Eogle PT. Dr.
Clerrunter, Fl. 32762
727-510-5399
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:
Signature Charles & Peterson

FILING FEE: \$25.00