

L210000190366

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2023 SEP -5 AM 8:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Daniel Armstrong 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:

Daniel Armstrong
(Name of Person)

Daniel Armstrong LLC
(Firm/Company)

204 S. Main Ave #48
(Address)

Lake Placid, Florida 33852
(City/State and Zip Code)

For further information concerning this matter, please call:

Daniel Armstrong at (863) 266-2373
(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)

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

FILED

The name of a limited liability company is

2023 SEP -5 AM 8:07

Daniel Armstrong LLC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization were filed on April 5, 2023 and assigned

document number L21000.190366

The delayed effective date the dissolution if not effective on the date of filing: October 30, 2023
(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.

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).

Retiring & Moving out of State of Florida


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

Daniel Armstrong

204 S. Main Ave #48

Lake Placid, FL 33852

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

Daniel Armstrong
Printed Name

FILING FEE: \$25.00