

121000205005

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

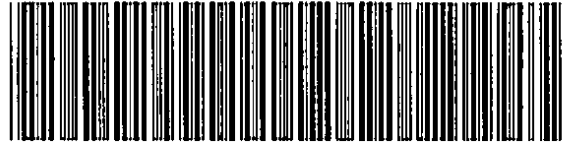
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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APR 21 2022

05/02/22--01001--026 **55.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2022 APR 29 PM 6:55

FILED

JUN 21 2022
S. PRATHER

COVER LETTER

TO: • Registration Section
Division of Corporations

SUBJECT: Myniah's Vinegar Express 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:

Myniah McClendon
(Name of Person)

Myniah's Vinegar Express LLC
(Firm/Company)

222 NW 5th Ave
(Address)

Delray Beach FL 33444
(City/State and Zip Code)

For further information concerning this matter, please call:

Myniah McClendon at (261) 506-2737
(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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2022 APR 29 PM 6:55

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1. The name of a limited liability company is

Mynian's Vinegar Express LLC

2. The Articles of Organization were filed on May 03 2021 and assigned
document number L21000205005

3. The delayed effective date the dissolution if not effective on the date of filing 04/28/2021
(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).

The business isnt making any money
and it's very overwhelming for me at
this time due to me being pregnant.

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

Mynian McClellan
222 NW 5th Ave
Delray Beach FL 33444

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

Mynian McClellan
Printed Name

FILING FEE: \$25.00