Florida Department of State

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(((H22000164216 3)))



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To:

Division of Corporations

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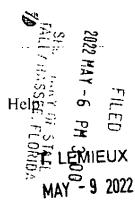
Account Name : LICENSE EXAM SERVICES

Account Number : I20120000042 Phone : (941)685-0955 Fax Number : (866)473-0571

LLC DISSOLUTION OR WITHDRAWAL SOLID OAK LLC

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From License Exam Services LLC 1.866.473.0571 Fri May 6.09:18:07.2022 MDT Page 4 of 5 (((H22000164216.3)))

COVER LETTER

	stration Section sion of Corporations		
SUDJECT.	SOLID OAK ELC		
SUBJECT:(Name of Limited Liability Company)			
The enclosed	Articles of Dissolution and fee(s) are submitted	ted for filing.	
Please return	all correspondence concerning this matter to	the following:	
	ERIC DEFOREST		
	(Nan	ne of Person)	
	SOLID OAK LLC		
	(Fin	n/Company)	
	8523 RAIN LILY XING		
		Address)	
	PARRISH, Ft. 34219		
	(City/Ste	ate and Zip Code)	
For further in	nformation concerning this matter, please call	:	
RO	BIN O'CONNOR	94] 685-0955 at ()	
-	(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)	
	iling Address:	Street Address:	
Re	gistration Section	Registration Section	

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

From License Exam Services LLC 1.866.473.0571 Fri May 6 09:18:07 2022 MDT Page 5 of 5 (((H22000164216 3)))

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is SOLID OAK LLC
2.	The Articles of Organization were filed on and assigned and assigned
	document number <u>L21000213721</u>
3.	The delayed effective date the dissolution if not effective on the date of filing: MAY 31, 2022 (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).
	Moved out of state
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
	SFI SFI
6. al	Signature of an authorized person or if there are no members, the signature of the person appointed and tisted pove to wind up the company's activities and affairs:
	ERIC DEFOREST
	Signature Printed Name

FILING FEE: \$25.00