

L21000236156

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

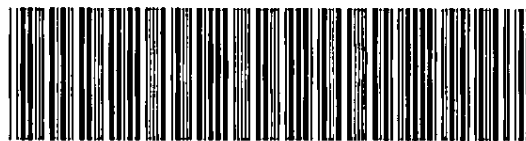
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400394307864

09/19/22--01021--025 \$425.00

2022 SEP 19 PM 2:25

Dissolution

SEP 21 2022

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ella's Mini Pancakes, 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:

David Misterek

(Name of Person)

Ella's Mini Pancakes

(Firm/Company)

4515 Rose Tree Ct

(Address)

Orlando, FL 32837

(City/State and Zip Code)

For further information concerning this matter, please call:

D. Misterek

(Name of Person)

at (336) 624 8709

(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

2022 SEP 19 PM 2:23

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

Ellas Mini Parcades, LLC

2. The Articles of Organization were filed on May 20, 2021 and assigned

document number L21000236156

3. The delayed effective date the dissolution if not effective on the date of filing: 9/15/2022
(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).

I would like to dissolve my company.

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

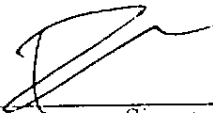
David Misterch

4515 Rose Tree Ct

Orlando, FL 32837

(336) 624 8709

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

David Misterch

Printed Name

FILING FEE: \$25.00