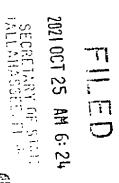
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Office Use Only



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10/25/21--01018--002 **25.00



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: WeGoty Custom Services, LLC
(Name of Limited Liability Company)
The enclosed Articles of Dissolution and feets) are submitted for filling.
Please return all correspondence concerning this matter to the following:
Jarah (Freen
(Name of Person)
MeGotu Custom Services
(Firm/Company)
1531 Rusty Circle
(Address)
Port Ovarye, Florida 32129 (City/State and Zip Code)
ym, and mp (lode)
For further information concerning this matter, please call:
South Francisco 200 Files
XIVAN Oven a 386 561-1593
(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 Taliahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is We Goth Custom Services, LLC
2. The Articles of Organization were filed on <u>June 2, 2021</u> and assigned
document number <u>L21000256827</u>
3. The delayed effective date the dissolution if not effective on the date of filing. 9 30 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).
Lie Con Lable TO Successfully Start
up and are moving 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:
6198 Del Mar Dr
Port Orange, FL 32127
J
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:
Sarah Green
Signature Printed Name

FILING FEE: \$25.00

SECRETARY OF STALLAHASSEE, FLC

FILE