

L21000280937

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

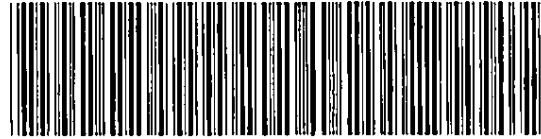
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100388153601

RECEIVED
2022 MAY 20 AM 10:17
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
FILED
2022 MAY 20 AM 7:59
TALLAHASSEE, FL

5/23/2022

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312
850-656-4724

Date: 05/20/2022
Acc#I20160000072

en: c SW

Name:	2951 S Bayshore Dr 1106, LLC
Document #:	
Order #:	14341278

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input type="checkbox"/>
	Plain: <input checked="" type="checkbox"/>
	COGS: <input type="checkbox"/>

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ 25.00

Thank you!

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED
2022 MAY 20 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FL

1. The name of a limited liability company is

2951 S Bayshore Dr 1106, LLC

2. The Articles of Organization were filed on June 16, 2021 and assigned

document number L21000280937

3. The delayed effective date the dissolution if not effective on the date of filing: _____
(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).

Written Consent of the Sole Member

Written Consent of the Sole Member

Written Consent of the Sole Member

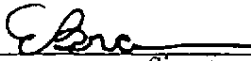
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Emily Brown

2951 S Bayshore Dr., Unit 1106

Miami, FL 33133

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

Emily Brown, Manager

Printed Name

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: 2951 S Bayshore Dr 1106, LLC

Document number of Limited Liability Company is: L21000280937

Date of dissolution was: _____

Description of information that must be included in a written claim:

Date, amount and basis of claim.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

2951 S Bayshore Dr., Unit 1106


Miami, FL 33133

Attn: Emily Brown

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Emily Brown, Manager

Printed Name of the Person Filing



Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00