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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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Special Instructions to Fil	ling Officer:	
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cf 3/23/2022

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Merciful Ride (Name of Lim	LLC ited Liability Company)
The enclosed Articles of Dissolution and fee(s) are submittee Please return all correspondence concerning this matter to	o the following:
<u>Mercedita</u> (Na	Surgie ame of Person) irm/Company)
2021 Sussex	Drive South (Address)
Orange Park (City/S) For further information concerning this matter, please cal	,
Mercedita Burgie (Name of Person)	at (<u>978</u>) <u>590-0038</u> (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$\int \text{\$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

FILED

1.	The name of a limited liability company is Nerciful Ride LL SECRETURY OF STATE		
2.	TALLAHASSEE, FL The Articles of Organization were filed on 7/6/2/ and assigned		
	document number <u>L 2/000307881</u>		
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).		
	I never started the company because the		
rehicle's insurance was too expensive for me to provide insurance.			
5	If there are no members, enter the name and address of the person appointed to wind up the company's		
٦.	activities and affairs: Mercedita Burgie		
	2021 SUSSEX DRIVE SOUTH ORANGE PARK, FL 32073		
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:		
3	Signature Merce dita Burgie		

FILING FEE: \$25.00