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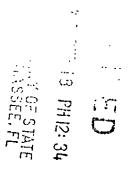
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08/18/24

COVER LETTER

ANGELA BASSO THERAPY, LL.C (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: Angela Basso (Name of Person) ANGELA BASSO THERAPY, LL.C (Firm/Company) 6322 Palma Del Mar Blvd S #106 (Address) St Petersburg, FL 33715 (City/State and Zip Code) For further information concerning this matter, pleas se call: Angela Basso (Name of Person) Angela Basso (Name of Person) (City/State and Zip Code) Enclosed is a check for the following amount: Street Address: Mailing Address: Street Address:		stration Section sion of Corporations			
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St Petersburg, FL 33715 (City/State and Zip Code) For further information concerning this matter, pleas se call: Angela Basso 623 810-8252 Av ((Firm/	Company)		
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■ \$25.00 Filing Fee and Certificate of Dissolution □ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)		(Name of Person)	(Area Code & Daytime Telephone Number)		
Certified Copy (additional copy is enclosed)	Enclosed is a ch	heck for the following amount:			
Mailing Address: Street Address:	■ \$ 25.0	00 Filing Fee and Certificate of Dissolution	_		
Registration Section Registration Section					
Division of Corporations Division of Corporations			Division of Corporations		
P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	-		2415 N. Monroe Street, Suite 810		

ARTICLE'S OF DISSOLUTION FOR A LIMITED ILIABILITY COMPANY

1.	The name of a limited liability company is
	ANGELA BASSO THERAPY, LLC
2.	The Articles of Organization were filed on 0'7/12/2021 and assigned
	document number L21000315948
3.	The delayed effective date the dissolution if mot effective on the date of filing: 07/09/2021 (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).
	Angela Basso - the sole Managing Member of the: LLC, needs close the LLC due to unexpected health issues.
	Angela Basso - the sole Managing Member of the LLC, needs close the LLC due to unexpected health issues. If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs:
	SO P
	THE 4
6. at	Signature of an authorized person or if there are no members, the signature of the person appointed and liste ove to wind up the company's activities and enffairs:
(May Laker Angela Basso
	Signature Printed Name

FIILING FEE: \$25.00