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12/27/23--01024--009 **25.00

2023 DEC 2:7 PM 6:24

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: MYATT A	APRAISALS, LLC	
	nked Liability Company)	
The enclosed Articles of Dissolution and feets) are subt	nitted for filing.	
Please return all correspondence concerning this matter		
rease return an correspondence concerning this matter		
NOEZ PATIRICK	MYATT	
MYATT A	ORAISALS, LLC	
,	Flim Company)	
955 CORBIN		
PAUM BAY F	(Address) 2 32908 State and Zip Code)	
City	State and Zip Code)	
For further information concerning this matter, please c	air;	
NOEL MYATT	at (<u>407</u>) <u>340 - 0870</u> (Area Code & Daytime Telephone Number)	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a cheek for the following amount:		
X \$25 00 Filing Fee and Certificate of Dissolution	☐ \$55,00 Filing Fee, Certificate of Dissolution & Certified Copy radditional copy is enclosed)	
Mailing Address:	Street Address:	
Registration Section	Registration Section	
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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

١.	The name of a limited liability company is MYATT APPRAISALS, LLC
2.	The Articles of Organization were filed on 912 and assigned
	document number <u>L 2 1000390044</u>
3.	The delayed effective date the dissolution if not effective on the date of filing: 12/31/203 (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).
	MOVING TO MARY LAND,
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<u>-</u>	If there are no members, enter the name and address of the person appointed to wind up the name any's
	activities and affairs:
	to the said arians.
	. / /
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed over to wird up the company's activities and affairs;
_	Affiliation I Note I VIVATI
	Signature Printed Name
	FILING FEE: \$25.00