

L21000428081

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

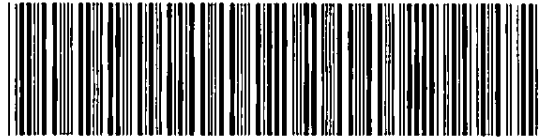
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2025 MAR 21 AM 10:46

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4-25

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SEMMES STORAGE HOLDINGS, LLC

(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:

SHANE CHAPIN

(Name of Person)

SEMMES STORAGE HOLDINGS LLC

(Firm/Company)

1601 HWY 40 STE M BOX 113

(Address)

KINGSLAND GA 31548

(City/State and Zip Code)

For further information concerning this matter, please call:

SHANE CHAPIN

(Name of Person)

585

at ()

683-1386

(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
Tallahassee, FL 32303

SECRET
TALLAHASSEE, FLORIDA

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**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
SEMME'S STORAGE HOLDINGS LLC
2. The Articles of Organization were filed on 9/29/2021 and assigned
document number L21000428081
3. The delayed effective date the dissolution if not effective on the date of filing: N/A
(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).
THE REAL ESTATE THAT THIS COMPANY MANAGED WAS SOLD.
THE REAL ESTATE THAT THIS COMPANY MANAGED WAS SOLD.
THE REAL ESTATE THAT THIS COMPANY MANAGED WAS SOLD.
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
SHANE CHAPIN
1640 HWY 40 STE M BOX 113 KINGSLAND GA 31548
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

SHANE CHAPIN
Printed Name

FILING FEE: \$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA