

L21 000 H28 H51

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

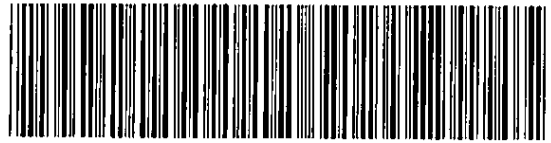
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100422263721

01/26/24--01018--010 **25.00

2024 JAN 26 PM 2:59
FBI/DOJ
FBI/DOJ

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Six Arrows 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:

Rebecca Viera
(Name of Person)

Six Arrows LLC
(Firm/Company)

5125 DaVinci way
(Address)

Ave Maria, FL 34142
(City/State and Zip Code)

For further information concerning this matter, please call:

Rebecca Viera at (941) 257-3186
(Name of Person) (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

2021 JUN 26 PM 2:59

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

1. The name of a limited liability company is

Six Arrows LLC

2. The Articles of Organization were filed on _____ and assigned

document number L21000428451

3. The delayed effective date the dissolution is not effective on the date of filing: 1-20-24
(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).

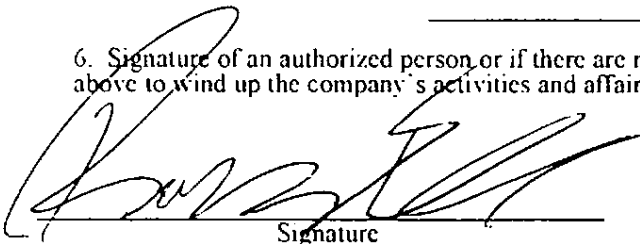
more fees than there is
income

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

Rebecca Viera
5125 Davinci way
Ave Maria, FL 34142

2024 JAN 26 PM 2:59
RECEIVED

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

Rebecca Viera
Printed Name

FILING FEE: \$25.00