

L21000435946

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : SNYDER & SNYDER, P.A.
Account Number : I20160000107
Phone : (954)475-1139
Fax Number : (954)475-2634

FILED
2024 FEB 27 AM 10:18
SECRETARY OF STATE
TALLAHASSEE, FL

LLC DISSOLUTION OR WITHDRAWAL TIGERLRM, LLC

Certificate of Status	0
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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S. J. C. 113

FEB 28 2024

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TigerLRM, LLC

DOCUMENT NUMBER: L21000435946

The enclosed **Notice of Limited Liability Company Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

William A. Snyder, Esq.

(Name of Contact Person)

Snyder & Snyder, P.A.

(Firm/Company)

7931 Orange Drive

(Address)

Davie, Florida 33328

(City/State and Zip Code)

For further information concerning this matter, please call:

William A. Snyder, Esq.

(Name of Contact Person)

at (954)

(Area Code)

475-1139

(Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy
(Additional copy is enclosed)

☐ \$60 Filing Fee,
Certificate of Status & 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

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: TIGERLRM, LLC

Document number of Limited Liability Company is: L21000435946

Date of dissolution was: 02/07/2024

Description of information that must be included in a written claim:

NAME OF CLAIMANT

ADDRESS

DESCRIPTION OF CLAIM

2024 FEB 27 AM 10:18
 FILED
 TALLAHASSEE, FL
 SECRETARY OF STATE

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

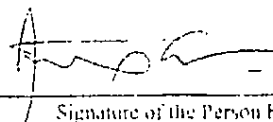
1500 CONCORD TERRACE, STE 102

SUNRISE, FLORIDA 33323

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

ATAL BANSAL, MANAGER

Printed Name of the Person Filing



Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00