

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax and it number (shown below) on the top and bottom of all pages of the document.

((H24000349695 3)))



H240003496953ABC9

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.  
Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.  
Account Number : I19990000006  
Phone : (407)425-7010  
Fax Number : (407)425-2747

RECEIVED  
TALLAHASSEE, FL  
DIVISION OF STATE

2024 OCT 21 14:10:36

FILED

LLC DISSOLUTION OR WITHDRAWAL  
TALLAHASSEE HIGH ROAD FLORIDA, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

M. SOLOMON

OCT 21 2024

Electronic Filing Menu

Corporate Filing Menu

Help

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Tallahassee High Road Florida, 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:

Matthew J. Petra, Esq.  
(Name of Person)

Zimmerman, Kiser & Sutcliffe, P.C.  
(Firm/Company)

315 E. Robinson Street, Suite 600  
(Address)

Orlando, FL 32801  
(City/State and Zip Code)

SECRETARY OF STATE  
TALLAHASSEE, FL

2024 OCT 21 AM 10:36

FILED

For further information concerning this matter, please call:

Eileen Soto, Legal Assistant at ( 407 ) 425-7010  
(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

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

1. The name of a limited liability company is

Tallahassee High Road Florida, LLC

2. The Articles of Organization were filed on October 21, 2021 and assigned

document number L21000459277

3. The delayed effective date the dissolution if not effective on the date of filing: \_\_\_\_\_  
(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).

Cessation of business operations

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

Rostislav Novakovsky

1110 Brickell Avenue, Unit 509

Miami, FL 33131

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:

Rostislav Novakovsky

Signature

Rostislav Novakovsky

Printed Name

**FILING FEE: \$25.00**

2024 OCT 21 4:10:36  
SEC. OF STATE  
TALLAHASSEE, FL

FILED

## 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: Tallahassee High Road Florida, LLC

Document number of Limited Liability Company is: L21000459277

Date of dissolution was: Upon filing

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

Detailed description of claim and include amount of claim, date of claim and name and address of claimant

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

Matthew J. Petra

Zimmerman, Kiser & Sutcliffe, Suite 600

Orlando, FL 32801

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.

Rostislav Novakovsky

Printed Name of the Person Filing

Rostislav Novakovsky

Signature of the Person Filing

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

FILED  
2024 OCT 21 4:10:36  
SECRETARY OF STATE  
TALLAHASSEE, FL