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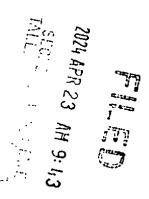
(Requestor's	Name)			
(Address)				
(Address)				
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(Document Number)				
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04/23/24--01042--015 **25.00



COVER LETTER

	Registration Section Division of Corporations			
SUBJEC	CT: EXPRESSO LLC		:	
	(Name of Limited	Liability Company)		
The enclosed Articles of Dissolution and fee(s) are submitted for filing.				
Please re	eturn all correspondence concerning this matter to th	e following:		
	RONALD BRUTON			
	(Name	of Person)		
	EXPRESSO LLC			
		Company)	<u> </u>	
	100 BEACON MILL LN.	ldress)	<u> </u>	
PALM COAST, FLORIDA 32137			<u> </u>	
(City/State and Zip Code)			 	
For turther information concerning this matter, please call:				
	RONALD BRUTON	at (386) 569-0429		
	(Name of Person)	(Area Code & Daytime Telepho	ode Number)	
Enclosed	is a check for the following amount:			
	\$25.00 Filing Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Diss Certified Copy (additional copy is	,	
			ļ.	
	Mailing Address: Registration Section	Street Address: Registration Section	ļ	
	Division of Corporations	Division of Corporations	ļi	
	P.O. Box 6327	The Centre of Tallahassee		
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite Tallahassee, FL 32303	8 10	
		rananassee, f.l. 32303		
			I	

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company	ris	
	EXPRESSO LLC		
2.	The Articles of Organization were filed	on 10/26/2021 and assigned	
	document number <u>L21000464498</u>		
3.	(effective date cannot be	on if not effective on the date of filing: 4/20/2024 prior to or more than 90 days later than date document is received for files not meet the applicable statutory filing requirements, this date whe Department of State's records.	ing) rill not be
4.	A description of occurrence that resulted 605.0707, Florida Statutes, (copy 605.07	d in the limited liability company's dissolution pursuant to s (07 on back cover letter).	ection
	TOTAL LOSS OF INCOME AND ACCRU	ED DEBT AND MONIES OWED TO MY COMPANY 142AT	024
	HAS BROUGHT MY COMPANY TO A PO	OINT OF BANKRUPTCY AND NEED TO PERMANENTLY	APR 20
	CLOSE THE BUSINESS.		
		15	ج -ئا
5.		and address of the person appointed to wind up the compan	y's
			·····
6. at	Signature of an authorized person or if the company's activities a	here are no members, the signature of the person appointed and affairs:	and listed
7	Mondel of Sular		
<u></u>	Ronald L. Bruton Signature	RONALD L. BRUTON Printed Name	
	*********	Timed Patter	

FILING FEE: \$25.00

Ronald I. Bruton

Expresso LLC CEO

386.569.0429 3fingersron@gmail.com Palm Coast, Florida

Information Below

Mailing Address: Ronald L. Bruton 100 Beacon Mill LN. Palm Coast, Florida. 32137

My contact information is listed above should you have any reason to contact me

Sincerely, Ronald L. Bruton Expresso LLC CEO

Round L. Buto

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

RONALD L. BRUTON

Printed Name of the Person Filing

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: EXPRESSO LLC Document number of Limited Liability Company is: 1.21000464498 Date of dissolution was: 4/20/2024 Description of information that must be included in a written claim: AMOUNT OWED FOR THE FINANCE OF A 2019 VOLVO VNL 740 SEMI TRUCK \$75,000.00 THE TRUCK WAS RETURNED BACK TO VOLVO FINANCE IN OCTOBER OF 2023 Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) VFS US LLC P.O.BOX 26131 GREENSBORO, NC 27402 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

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