

L21000476089

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐

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(Business Entity Name)

(Document Number)

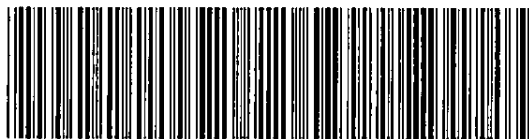
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2024 APR 10 PM 1:24
SECRETARY OF STATE
TALLAHASSEE, FL 32399

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Habana Mohawk, 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:

William C Lloyd

(Name of Person)

Habana Mohawk, LLC

(Firm/Company)

147 2nd Ave S, Ste 400

(Address)

St Petersburg, FL 33701

(City/State and Zip Code)

For further information concerning this matter, please call:

Angela Thompson

(Name of Person)

727

895-2150

at

(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

Habana Mohawk, LLC

2. The Articles of Organization were filed on 11-03-2021

and assigned

document number L21000476089

3. The delayed effective date the dissolution if not effective on the date of filing: 3-20-2024

(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).

Unanimous Consent of all Members

FILED
2024 APR 10 PM 1:24
TALLAHASSEE
SECRETARY OF STATE

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

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

William C Lloyd

Printed Name

FILING FEE: \$25.00

92 HABANA LLC
147 2ND AVE S STE 400
ST PETERSBURG, FL 33701-4399

REPUBLIC BANK
www.republicbank.com
Member FDIC

1153

21-131/830
318
CHECK ARMS

3/20/2024

PAY TO THE
ORDER OF Florida Department of State

\$ **25.00

Twenty-Five and 00/100*****

DOLLARS

Florida Department of State
Divisions of Corporations,
P.O. Box 6198
Tallahassee, FL 32314

MEMO

L21000476089 - Habana Mohawk Dissolution


AUTHORIZED SIGNATURE



001153 083001314 59566078