

L21000504132

(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



400397009074

FILED

2022 NOV 30 AM 10:06

SECRETARY OF
STATE, FLORIDA

RECEIVED

2022 NOV 30 AM 11:32

SECRETARY OF
STATE, FLORIDA

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 163569 7391412

AUTHORIZATION :



COST LIMIT : \$ 25.00

ORDER DATE : November 29, 2022

ORDER TIME : 9:02 AM

ORDER NO. : 163569-005

CUSTOMER NO: 7391412

DOMESTIC FILINGS

NAME: SR OHINDUST LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland - EXT#

EXAMINER'S INITIALS: _____

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

2022 NOV 30 AM 10: 06

SECRETARY OF STATE
TALLAHASSEE, FL

1. The name of a limited liability company is

SR OHINDUST LLC

2. The Articles of Organization were filed on 11/30/2021 and assigned

document number L21000504132

3. The delayed effective date the dissolution if not effective on the date of filing: N/A
(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).

The Company never commenced business, and no longer needs to commence business. There are no debts,

obligations, or liabilities of the Company. There are no suits pending against the Company in any jurisdiction.

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

Peter J. McHugh

c/o Greenberg Traurig LLP, 500 Campus Drive, Suite 400

Florham Park, NJ 07932

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

Peter J. McHugh

Printed Name

FILING FEE: \$25.00