

LA100519233

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H24000128470 3)))



H240001284703ABC

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.

Account Number : 076077001702

Phone : (407)841-1200

Fax Number : (407)423-1831

LLC DISSOLUTION OR WITHDRAWAL

ADVELIU ENTERPRISES LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

RECEIVED

2024 APR -8 PM 4:36

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

2024 APR -8 AM 11:03

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Help

T. LEMIEUX
APR 09 2024

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

ADVELU ENTERPRISES LLC

2. The Articles of Organization were filed on December 8, 2021 and assigned

document number 121000519233

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).

Consent of the sole Member.

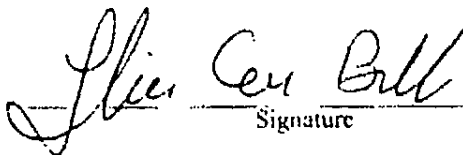
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Julio C. Bell

936 SW 1st Avenue, #134

Miami, FL 33130

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

Julio C. Bell

Printed Name

FILING FEE: \$25.00

2024 APR -8 AM 11:03

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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: Adveliu Enterprises LLC

Document number of Limited Liability Company is: L21000519233

Date of dissolution was: Upon filing

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

Name of Claimant: _____

Address of Claimant: _____

Basis of Claim: _____

Amount of Claim: _____

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

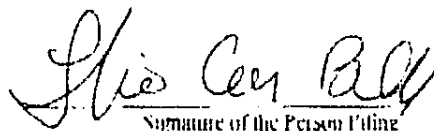
936 SW 1st Avenue, #134

Miami, FL 33130

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.

Julio C. Bell

Printed Name of the Person Filing



Signature of the Person Filing