L21000521900

(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

800420230878

12/15/23--01013--011 **25.00

FILED
2023 DEC 15 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Adorum, 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:

Rory B. Weiner
(Name of Person)

Rory B. Weiner PA
(Firm/Company)

635 W. Lumsden Road
(Address)

Brandon, FL 33511
(City/State and Zip Code)

For further information concerning this matter, please call:

Rory B. Weiner at (813) 681-3300
(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

   Adorum, LLC

2. The Articles of Organization were filed on 12/10/2021 and assigned

   document number L21000521900

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).

   No longer in business

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Timothy Edmiston, 6502 Brandon Circle Riverview, Florida 33578

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

   Timothy Edmiston
   Printed Name

FILING FEE: $25.00

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: Adorum, LLC

Document number of Limited Liability Company is: L21000521900

Date of dissolution was: _____

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

Nature of goods or services and date and amount owed.

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

Timothy Edmiston, 6502 BRANDON CIRCLE RIVERVIEW, FL 33578

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.

Timothy Edmiston

Printed Name of the Person Filing

Signature of the Person Filing

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