L21000530790

(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:
J. HORNE
FEB - 5 2024





200421245762

01/12/24--01012--013 **25.00



COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: PREP Equity Par	Rtyces LLC 1 Liability Company)					
(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:						
Robert D. Cumming 5 (Name of Person)						
Menber (Firm/Company)						
(i in company)						
655 16th Ave NE						
Jt. Returns Durg, FL 33704 (City/State and Zi) Code)						
For further information concerning this matter, please call:						
Robert Cumning 5 (Name of Person)	at (920) 737 7304 (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:	Street Address:					
Registration Section	Registration Section					
Division of Corporations	Division of Corporations					
P.O. Box 6327	The Centre of Tallahassee					

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

		ARTICLES OF E FO A LIMITED LIABI	R	24 JAN 12 AN 9:01
		A LIMITED LIADI	LITT COMPANT	Marian 44 o.
1. The nate	me of a limited liabili	ty company is	s LL C	
2. The Ar	ticles of Organization	were filed on $12/2$	1/2021	and assigned
docume	ent number L21	200530790	2	
Note:	If the date inserted in the	te dissolution if not effect late cannot be prior to or more his block does not meet the live date on the Departmen	applicable statutory fili	ing: 1-10-24 ate document is received for filing) and requirements, this date will not be
4. A desc 605.070	ription of occurrence 07. Florida Statutes, (o Last Tena	opy 605,0707 on back o	ed liability company's cover letter).	s dissolution pursuant to section
	Selling on	y property	ossociate	d w/ this LLC
	e are no members, ent	er the name and address Robert D	of the person appoint	ed to wind up the company's
		St. Pet	ensbury, i	FL 33704
6. Signate above to v	are of an authorized p	erson or if there are no r s activities and affairs:	nembers, the signature	e of the person appointed and listed
2/1			Rober	+ D. Cummings
/(-*-	Signature	FILING F	Pri: FEE: \$25.00	nted Name

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: Fref Egytty Partners LLC
Document number of Limited Liability Company is: L21000530790
Date of dissolution was: 1-10-24
Description of information that must be included in a written claim:
Pate of Occurance/Claim Pescention of Claim
Rescription of Claim
Amount of # Claiming
<u> </u>
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) Robert D. Cummings 655 16th Ave NE St. Petersbury, FL 33704
A claim against the above named limited liability company will be barred unless a proceeding to enforce t
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