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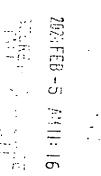
(Requestor's Name)					
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PICK-UP WAIT MAIL					
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(Business Entity Name)					
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## **COVER LETTER**

TO:	Registration Section Division of Corporations					
SUBJ	Shannon & Company CT:					
(Name of Limited Liability Company)						
		-				
	Wendy Shannon					
	(Name o	f Person)	•			
	Shannon & Company					
(Firm/Company)						
	2619 Bayshore Blvd. #600  (Address)					
	Tampa, FL 33629	—··· · .	. E			
	(City/State a	nd Zip Code)				
For further information concerning this matter, please call:						
	Wendy Shannon	404 8051925				
	(Name of Person)		ber)			
Enclose	Division of Corporations  Subject:  Shannon & 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:  Wendy Shannon  (Name of Person)  Shannon & Company  (Firm/Company)  2619 Bayshore Blvd. #600  (Address)  Tampa, FL 33629  (City/State and Zip Code)  For further information concerning this matter, please call:  Wendy Shannon  404  8051925					
į	\$25.00 Filing Fee and Certificate of Dissolution					
	Registration Section Division of Corporations P.O. Box 6327	Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

<ol> <li>The name of a limited liabil</li> </ol>	ity company is		
Shannon & Company LLC			
. The Articles of Organization	n were filed on January 19, 2022	and assigned	
document number L2200003	4412		
Note: If the date inserted in t	he dissolution if not effective on the date of date cannot be prior to or more than 90 days later the his block does not meet the applicable statutory tive date on the Department of State's records.	an date document is received	
605.0707, Florida Statutes, (	that resulted in the limited liability comparcopy 605.0707 on back cover letter).	ny`s dissolution pursuar	nt to section
Retired		·	21
		\ <u>:</u>	
44.			r = 1
			<del>أ</del>
		;	
i. If there are no members, ent	er the name and address of the person appo	pinted to wind up the co	mpany's
activities and arrains.			
		<del>.</del> .	
<ul> <li>Signature of an authorized p</li> <li>bove to wind up the company</li> </ul>	erson or if there are no members, the signars activities and affairs:	ture of the person appo	inted and list
Vendy Shann	Wendy Shannon		
Signature		Printed Name	

**FILING FEE: \$25.00**