L22000094819

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COVER LETTER

SUBJECT: FREEDOM ONE MEDIA 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:
ROBERTT. MARRA (Name of Person)
(v viiid b) v disvaly
(Firm/Company)
120 SMITH LAWE
(Address)
CRESCENT CITY FL 32112 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Rosea MARRA at (732) 904-4193 (Name of Person) (Area Code & Daytime Telephone Number)
(ratio code a Bayanio religione religion)
Enclosed is a check for the following amount:
\$\times \text{S25.00 Filing Fee and Certificate of Dissolution}\$\tag{\topsigma} \text{S55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)}\$

Mailing Address: Registration Section
Division of Corporations P.O. Box 6327

TO:

Registration Section Division of Corporations

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

l.	The name of a limited liability company is
	FREEDOM ONE MEDIA LU
2.	The Articles of Organization were filed on $2/21/2022$ and assigned
	document number <u>L 2200009 4819</u>
3.	The delayed effective date the dissolution if not effective on the date of filing: 22/20 (effective date cannot be prior to or more than 90 days later than date document is received for filing) Note: It the date inserted in this block does not meet the applicable statutory tiling 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 REVENUE
	AND BUSINESS START-UP FOUND TO BE NOT- FEASABLE.
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:
	Signature Printed Name

FILING FEE: \$25.00