

L22000099882

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

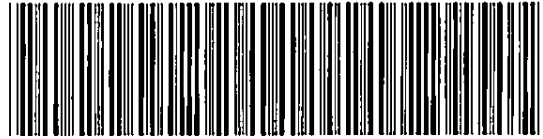
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

(R)
Notice

march 17th, 2025

Office Use Only



600443366206

01/29/25--01010--009 2500

List description &
fill out
notice

Dissolution.

[Handwritten signature]



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 3, 2025

MINH NGUYEN
5524 FLORENCE HARBOR DR
ORLANDO, FL 32829 US

SUBJECT: PASSIVE LEGACY, LLC
Ref. Number: L22000099882

We have received your document for PASSIVE LEGACY, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

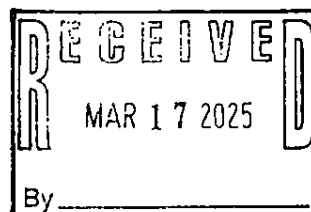
Please fill out section 4 by list a description of the occurrence that resulted in the LLC'S dissolution. Also, notices are optional - but if you would like to have a notice attached, then all section of the notice page must be filled out.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Morgan E Lovett
Regulatory Specialist II

Letter Number: 025A00004599



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Passive Legacy 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:

Minh Nguyen
(Name of Person)

(Firm/Company)

5524 Florence Harbor Dr
(Address)

Orlando, FL 32829
(City/State and Zip Code)

For further information concerning this matter, please call:

Minh Nguyen at (863) 368-2011
(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
PASSIVE LEGACY LLC

2. The Articles of Organization were filed on 20/01/2025 and assigned
document number L220000099882

3. The delayed effective date the dissolution if not effective on the date of filing: 03/02/2025
(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).

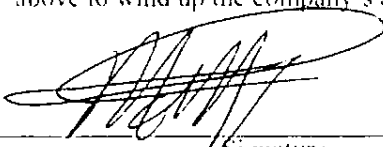
Business was unsuccessful and was unable to get it fully
established. Personal reasons: Partner had disagreements
with project planning. Unsuccessful with pulling county permits.
Partners deciding to part ways.

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

MINH NGUYEN

5524 FLORENCE HARBOR DRIVE ORLANDO FL 32829

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

MINH NGUYEN

Printed Name

FILING FEE: \$25.00