L 22000120851

(Requestor's Name)							
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600388840806

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COVER LETTER

Division of Corporations					
Privada LLC					
SUBJECT:(Name of Lim	nited Liability Company)				
The enclosed Articles of Dissolution and fee(s) are subm	nitted for filing.				
Please return all correspondence concerning this matter t	to the following:				
Clark Thornton	SEC ALL	2022			
(N	ame of Person)	2022 DEC -6 PM			
Andrew Transport Services dba Privada Club					
(Firm/Company) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7					
	(Address)	3: 30			
Orlando, FL 32804					
(City/S	State and Zip Code)				
For further information concerning this matter, please ca	all;				
Clark Thornton	407 342-9304 at ()				
(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: Paristration Section	Street Address: Registration Section				
Registration Section Division of Corporations	Division of Corporations				
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	The name of a limited liabil Privada LLC	ity company is				
	The Articles of Organization	n were filed on 03/09/	2022	and assig	gned	
	document number L2200012	0851	<u>.</u>			
-	The delayed effective date t (effective Note: If the date inserted in t listed as the document's effec	date cannot be prior to or his block does not mee	more than 90 days later that t the applicable statutory	han date document is y filing requirement	received for f ts, this date	filing) will not b
. (A description of occurrence 605.0707, Florida Statutes, (that resulted in the li copy 605.0707 on ba	mited liability compa ck cover letter).	my's dissolution p	oursuant to	section
	Privada LLC is a fraudalent fili	ng. The LLC was form	ed without the knowled	ge or authorization	of Brian De	sind.
-		••				
	If there are no members, em	ter the name and add	ess of the person app	ointed to wind up	the compa	inv's
	activities and affairs:	N/A	•	·		
						<u>-</u> _
be	Signature of an authorized pove to wind up the company	person or if there are 's activities and affai	no members, the signars:	ature of the person	1 appointed	and liste
			Brian Desind			
	Signature			Printed Name	SE!	
		TOTAL TAY	C FFF. 625.00			2027

FILING FEE: \$25.00

FILED 122 DEC -6 PM 3: 30