L22000126050

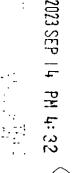
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:

Office Use Only



300415378273

09/14/23--01008--011 ++25.00





COVER LETTER

.

TO: Registration Section Division of Corporation		·
SUBJECT: Pick	ed Shops, LL (Name of Limited	(Liability Company)
The enclosed Articles of Di	ssolution and fee(s) are submitted	d for filing.
Please return all correspond	ence concerning this matter to th	e following:
 	Melissa (Name	Dandidge of Person)
	(Firm/	Company)
	1411 E Stra	tha St
	Pensucola!	FL3QSO1 and Zip Code)
For further information con-	cerning this matter, please call:	
meliss	a Dandh dge Name of Person)	at (850) 428-1052 (Area Code & Daytime Telephone Number)
Enclosed is a check for the foll	owing amount:	
☑ \$25.00 Filing Fee an	d Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	porations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
rananassee, I L	J 4 3 1 T	2 113 14. MOINGE BREEK, Builte 010

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is PICKED SMOPS, LLC	
2. The Articles of Organization were filed on 3/14/2022 and assigned	
document number <u>L220001260</u> 50	
3. The delayed effective date the dissolution if not effective on the date of filing: Oall 2023 (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).	
This business never fully opened due to	
heath issus, surgenes, and medical needs.	
I was over able to actually open to customer.	S
to shop	
activities and affairs: Melissa Dandndge Solutions The there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:	
1411 E strong St	
Pensawia, CL 32501 7 MI	
Signature of an authorized person or if there are no members, the signature of the person appointed and listed bove to wind up the company's activities and affairs:	
Printed Name New SSA Dan du dge Printed Name	

FILING FEE: \$25.00