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(Requestor's Name)		
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AUG 1 8 2023		

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Juvini Party	Rontal Costunes LLC
(Name of Lin	nited Liability Company)
The enclosed Articles of Dissolution and fee(s) are subm	nitted for filing.
Please return all correspondence concerning this matter	to the following:
Marzlen J lags	lame of Person)
(F	irm/Company)
75 Fair Way DI	(Address)
_	(Audress)
Miari Springs	33164 FLONIAL State and Zip Code)
(City/S	State and Zip Code)
For further information, concerning this matter, please or	Hr.
Martin J Lagos Horanda	at (17%) 246 - 4303 (Area Code & Daytime Telephone Number)
(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 Add ress:	Street Address:
Registration Section	Registration Section Division of Corporations
Division of Corporations P.O. Box 6:327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

	ARTICLES OF DISSOLUTION		
	FOR A LIMITED LIABILITY COMPANY	2023	3F.C
1.	The name of a limited liability company is Jorni Party Pental Cortomes LLC	2023 JUL 14-	FILED HE TARY O
2.	The Articles of Organization were filed on March 23, 2022 and assigned	AM 9: 2	F STATI
	document number 122000 142 749	-	Ú.
3.	The delayed effective date the dissolution if not effective on the date of filing: $0? - 10 - 202$ (effective date cannot be prior to or more than 90 days later than date document is received for fil Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we listed as the document's effective date on the Department of State's records.		oc
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to s 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).	ection	
	Bussines Out of Services No Longer N	'éé!	it
5.	If there are no members, enter the name and address of the person appointed to wind up the company	 1y's	
	activities and affairs:		
			
			
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed bove to wind up the company's activities and affairs:	and list	ted
	What A Lages Hours	الموسيدا	- 2.

FILING FEE: \$25.00