L22000 200 409

(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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COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJE	Let Jean Help LLC			
оорац		ted Liability Company)		
	losed Articles of Dissolution and fee(s) are submit eturn all correspondence concerning this matter to			
	Jean L Felicita			
	(Nai	me of Person)		
	Let Jean Help LLC			
	(Firm/Company)			
	6033 34th Street West, Apt 97			
	(Address)			
	Bradenton, FL 34210			
	(City/Sta	ate and Zip Code)		
For furth	her information concerning this matter, please call	:		
	Jean L Felicita	941 565-2768		
	(Name of Person)	at ()(Area Code & Daytime Telephone Number)		
Enclosed	is a check for the following amount:			
V	\$25.00 Filing Fee and Certificate of Dissolution	S55.00 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

2.	The Articles of Organization	n were filed on	and assigned		
	document number \(\frac{88-23414-}{88-23414-}	m 122 000 200 41	A		
3.	Note: If the date inserted in t	ne dissolution if not effective on the dat date cannot be prior to or more than 90 days late its block does not meet the applicable statu- tive date on the Department of State's recor-	tory filing requirements, this date will n		
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).				
		inue this business. I am the sole employee.	202 3 SE		
			APR		
-			$\frac{1}{2}$ $\overline{\omega}$		
			77 4		
			9: 2:		
	If there are no members, ent activities and affairs:	er the name and address of the person a	ppointed to wind up the company's		