

L 220000291898

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

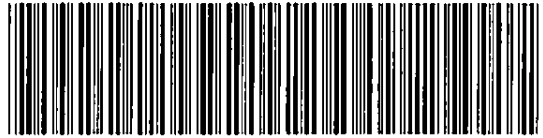
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Wmills

Office Use Only



200427020332

04/16/24--01013--009 **55.00

RECEIVED
TALLAHASSEE

2024 APR -9 PM 5:05

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Williams Transaction Services 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:

Diane Williams

(Name of Person)

Williams Transaction Services LLC

(Firm/Company)

4905 Foxwood Lake Drive

(Address)

Lakeland, FL 33810

(City/State and Zip Code)

For further information concerning this matter, please call:

Diane Williams

(Name of Person)

515

205-6375

at (_____) _____

(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

Williams Transaction Services LLC

2. The Articles of Organization were filed on 6/28/2022 and assigned

document number 1.22000291898

3. The delayed effective date the dissolution if not effective on the date of filing: _____
(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).

Sole member, Diane Williams, agrees to dissolve the company due to stoppage of the business.

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

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:

Diane Williams
Signature

Diane Williams

Printed Name

FILING FEE: \$25.00

FILED
2024 APR -9 PM 5:05
SEC. OF STATE
TALLAHASSEE, FL

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: Williams Transaction Services LLC

Document number of Limited Liability Company is: L22000291898

Date of dissolution was: _____

Description of information that must be included in a written claim:

Address of transaction and name of all entities involved, including contact information such as phone numbers
and email addresses.

Date(s) of services provided

Description of claim and remedy being sought

All contact information for entity filing the claim

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

4905 Foxwood Lake Drive

Lakeland, FL 33810

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Diane Williams

Printed Name of the Person Filing



Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00