

L22000 295 394

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

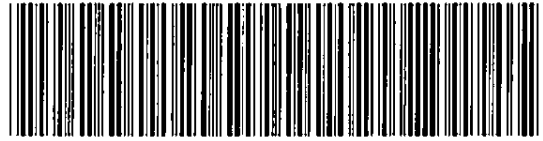
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2024 MAR -4 PM 3:03  
SECRETARY OF STATE  
TALLAHASSEE, FL

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

MAGGI'S ADVENTURE GETAWAYS, LLC

2. The Articles of Organization were filed on JUNE 30, 2022 and assigned

document number L22000295394

3. The delayed effective date the dissolution if not effective on the date of filing: APRIL 15, 2024  
(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).

THE BUSINESS IS NO LONGER VIABLE OR PROFITABLE

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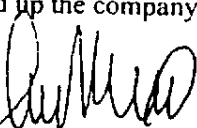
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

MARGARITA PARDO

29 NE 106 ST.

MIAMI SHORES, FL 33138

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:



Signature

MARGARITA PARDO

Printed Name

**FILING FEE: \$25.00**

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MAGGII'S ADVENTURE GETAWAYS, 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:

MARGARITA PAZDO

(Name of Person)

MAGGII'S ADVENTURE GETAWAYS, LLC

(Firm/Company)

29 NE 106 ST.

(Address)

MIAMI SHORES, FL 33138

(City/State and Zip Code)

For further information concerning this matter, please call:

MARGARITA PAZDO

(Name of Person)

at

(305)

308-426

(Area Code & Daytime Telephone Number)

SECRETARY OF STATE  
TALLAHASSEE, FL

2024 MAR -4 PM 3:03

FILED

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