## Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LIESER SKAFF ALEXANDER, PLLC

Account Number : 120150000057 Phone : (813)280-1256 : (813)251-8715 Fax Number

> LLC DISSOLUTION OR WITHDRAWAL GATEKEEPER PRESS LLC

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Tallahassee, FL 32314

## **COVER LETTER**

H22000323902

TO: Registration Section Division of Corporations Gatekeeper Press LLC SUBJECT: (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: Ghada Skaff (Name of Person) Lieser Skaff Alexander (Firm/Company) 403 N. Howard Ave. (Address) Tampa, FL 33606 (City/State and Zip Code) For further information concerning this matter, please call: Robert Price (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for the following amount: ☐ \$55.00 Filing Fee, Certificate of Dissolution & ■ \$25,00 Filing Fee and Certificate of Dissolution Certified Copy (additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

H22000323902

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liabili Gatekeeper Press LLC	y company is				
2.	The Articles of Organization	were filed on July 7, 202	2	and assigned		
	document number L2200030	2938	-			
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 605.0707, Florida Statutes, (c	that resulted in the limite copy 605.0707 on back co	d liability company over letter).	's dissolution pursuant to section		
	· ·	• •	i rather than created as part of the conversion of a			
5.	If there are no members, ent activities and affairs:	er the name and address o	of the person appoir	nted to wind up the company's		
	activities into analis.					
6. al	Signature of an authorized poove to wind up the company	erson or if there are no ms activities and affairs:	nembers, the signatu	ire of the person appointed and listed		
	1116		Robert Price			
	Signature	***		inted Name		

FILING FEE: \$25.00