

卷之三

(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:



000420973290

2023 JAN -3 PM 12:51

SECRETARY OF STATE
TALLAHASSEE, FL

FILED

RECEIVED

50
MICHIGAN AVENUE
TALLAHASSEE, FLORIDA

Office Use Only

CSC CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: 61594

To: Department Of State, Division Of Corporations
From: Elyiena Baker
Ext: 61594
Date: 01/03/24
Order #: 1381562-2
Re: RRPVI COREY SPB GP LLC
Processing Method: Routine

TO WHOM IT MAY CONCERN:

---Enclosed-please find:

Application for Dissolution/Cancellation/Termination

Amount to be deducted from our State Account: \$25.00 - FL State Account Number:
I20000000195

(Signature)

Please take the following action:

File in your office on basis
Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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

1. The name of a limited liability company is
RRPVI COREY SPB GP LLC
2. The Articles of Organization were filed on July 7, 2022 and assigned document number L22000304307
3. The delayed effective date the dissolution if not effective on the date of filing: December 31, 2023
(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 wishes to dissolve

2023 JAN - 3 PM 2:51
SECRETARY OF STATE
TIA-LAHASSE, FL

丁
一
三
四

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

9. Signature of an authorized person or if there are no members, the signature above to wind up the company's activities and affairs:

— Document signed by:

→ DocuSigned by:

Karen D. Geller

Jennifer S. Stull

574173851577245

Signature

—УТБ АВЛ ЗВОНИКИИ

Karen D. Geller / Jennifer S. Stull, both as Vice Presidents
Printed Name

FILING FEE: \$25.00