

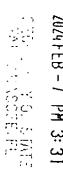
| (Re                                     | equestor's Name)   |             |
|---|--------------------|-------------|
| (Ac                                     | idress)            |             |
| (Ac                                     | ddress)            |             |
| (Ci                                     | ty/State/Zip/Phone | e #)        |
| PICK-UP                                 | ☐ WAIT             | MAIL        |
| (Bu                                     | isiness Entity Nar | me)         |
| (Document Number)                       |                    |             |
| Certified Copies                        | _ Certificates     | s of Status |
| Special Instructions to Filing Officer: |                    |             |
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Office Use Only



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## **COVER LETTER**

| TO: Registration Section Division of Corporations  |  |  |  |  |
|--|--|--|--|--|
| SUBJECT: Forings Corner [- (Name of Limited  | Drm E More, LLC<br>Liability Company)  |  |  |  |
| The enclosed Articles of Dissolution and fee(s) are submitted                                      | d for filing.  |  |  |  |
| Please return all correspondence concerning this matter to the                                     | e following:   |  |  |  |
| (i-unic  | Dairahty<br>of Person)   |  |  |  |
| FOCINOS COFILES FUSM EMORC, LLC (Firm/Company)   |  |  |  |  |
| 115 Cagriera F.  (Address)   |  |  |  |  |
| Cocoa FZ (City/State   | 32722<br>and Zip Code)   |  |  |  |
| For further information concerning this matter, please call:                                       |  |  |  |  |
| (Name of Person)   | at (321) 794-6905<br>(Area Code & Daytime Telephone Number)  |  |  |  |
| Enclosed is a check for the following amount:  |  |  |  |  |
| DI \$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   |
|----------|--|
|          | Fornos Corner Farm & More Lui  |
| 2.       | The Articles of Organization were filed on August 9, 2022 and assigned   |
|          | document number <u>L22000350890</u>  |
| 3.       | The delayed effective date the dissolution if not effective on the date of filing: Feb 1, Zo ZH (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).   |
|          | Lost the base where the Store was doing  |
|          | 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: Diana Doughty  |
|          | 115 Coquina Dr.  |
|          | <u>Cocoa, Fl. 32922</u>  |
| 6.<br>ab | Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:  |
| <u>\</u> | Diana Doughty  Signature  Printed Name   |

**FILING FEE: \$25.00** 

## 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: FOCITIES COFFIES FORM & NOIZ LLC  |
|--|
| Document number of Limited Liability Company is: L2200350890   |
| Date of dissolution was: Fcb. 1 7074   |
| Description of information that must be included in a written claim:   |
| There shouldn't be any Everything was paid   |
| What I awayou - description - How much & Leceipt, &  |
| why.   |
| Maria de la compania del compania de la compania de la compania del compania de la compania del compania de la compania de la compania de la compania del compania de la compania del compania d |
| Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  |
| Diana Doughty  |
| _115 Cogleina Dr.  |
| Cocoa FL 32922   |
|  |
|  |

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

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.