L22000 396 830

| (Requestor's Name) | |
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| | |
| (Address) | _ |
| | |
| | |
| (Address) | |
| | |
| (City/State/Zip/Phone #) | |
| | |
| PICK-UP WAIT MAIL | |
| | |
| | |
| (Business Entity Name) | |
| | |
| (Document Number) | _ |
| | |
| Certified Copies Certificates of Status | |
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| Special Instructions to Filing Officer: | |
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Office Use Only



100423420391

02/03/24--01018--011 **25.00

SECRE SECRETE

COVER LETTER

| TO: Registration Section Division of Corporations | |
|--|--|
| SUBJECT: Collegiate Cleane (Name of Limited Liabi | ility Company) |
| The enclosed Articles of Dissolution and fee(s) are submitted for f | iling. |
| Please return all correspondence concerning this matter to the folio | owing: |
| Jequeline H. | ARROYS |
| Collegiale Cleane (Firm/Compa | 110 |
| 7586 Scacuast | Drive T |
| Parkland, FL (City/State and Zi | |
| (City/State and Zi | 33067 E |
| For further information concerning this matter, please call: | · 111 |
| Jaqueline Arrays at (Name of Person) | (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) |
| Registration Section Re Division of Corporations Di P.O. Box 6327 Th | reet Address: egistration Section vision of Corporations he Centre of Tallahassee 15 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 |
|-------------|--|
| | Collegiate Cleaners |
| <u>.</u> | The Articles of Organization were filed on $\frac{9/12/22}{22}$ and assigned |
| | document number <u>L22 000 396830</u> |
| 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 505.0707, Florida Statutes, (copy 605.0707 on back cover letter). |
| _ | Members annot agree on business |
| _ | Members cannot agree on business = = = coperating decisions. Business is not |
| _ | making money. |
| | |
| | If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: |
| | |
| | |
| | |
| | |
| 6. S abo | Signature of an authorized person or if there are no members, the signature of the person appointed and lister ve to wind up the company's activities and affairs: |
| <u>\</u> | Jaqueline H. ARROD Printed Name |
| | FILING FEE: \$25.00 |