

L22000421486

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

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

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200414471682

08/29/23--01024--016 \*25.00

DIVISION OF RECORDS

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## COVER LETTER

TO: Registration Section  
Division of Corporations  
AVENUE BROOKS 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:

SAVANNAH FIGLER

\_\_\_\_\_  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

7549 BRIGHTWATER PLACE

\_\_\_\_\_  
(Address)

OVIEDO, FLORIDA 32765

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

SAVANNAH FIGLER

407

754-8210

\_\_\_\_\_  
(Name of Person)

at (\_\_\_\_\_  
(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)

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

2023 AUG 29 PM12:40  
REGISTRATION &  
DIVISION OF CORPORATIONS

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

1. The name of a limited liability company is  
AVENUE BROOKS LLC

2. The Articles of Organization were filed on 09/28/2022 and assigned  
document number L22000421486

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 605.0707, Florida Statutes. (copy 605.0707 on back cover letter).

Business was never started ... I decided not to have/run my own business. Thank you.

Division of State  
Division of Corporations

2023 AUG 29 PM42:40

5. If there are no members, enter the name and address of the person appointed to wind up the company  
activities and affairs: SAVANNAH FIGLER  
7549 BRIGHTWATER PLACE  
OVIEDO, FLORIDA 32765

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:

Savannah Figler  
Signature

SAVANNAH FIGLER

Printed Name

**FILING FEE: \$25.00**