L22000428075

(Requestor's Name)
(Address)
(Undiress)
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(0) (0) (7)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

NTITY 1	_{NAME} Wilkinso	on Commercial Partners, LLC
OCUME	ENT NUMBER_	
		PLEASE FILE THE ATTACHED AND RETURN
(XXXXXX	××	Plain Copy
		Certified Copy
	<u> </u>	Certificate of Status
	/	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY
		Certified Copy of Arts & Amendments
		Certified Copy of Arts & Amendments Complete File (Including Annual Reports)
		Certificate of Status
		Certificate of Status Reflecting:
		APOSTILLE' / NOTARIAL CERTIFICATION
OUNTRY	U OF DESTINATION	ON
IUMBER	OF CERTIFICAT	ES REQUESTED
- COTAL C	OWED \$ 25.00	ACCOUNT # 120160000072

TO:

	gistration Section vision of Corporations					
·	Wilkinson Commercial Partners, LLC (Name of Limited Liability Company)					
SUBJECT:						
The enclose	d Articles of Dissolution and fee(s) are submit	ted for filing.				
Please retur	n all correspondence concerning this matter to	the following:				
	Jordan Viera					
	(Nai	me of Person)				
	Nelson Mullins Riley & Scarborough, Ll	LP				
	(Fir	m/Company)				
	201 17th Street NW, Suite 1700					
	(Address)					
	Atlanta, GA. 30363					
	(City/Sta	ate and Zip Code)				
For further i	information concerning this matter, please call	:				
Jo	rdan Viera	404 322-6169 at (
	(Name of Person)	(Area Code & Daytime Telephone Number)				
Enclosed is a	check for the following amount:					
= \$2.	5.00 Filing Fee and Certificate of Dissolution	\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)				
<u>M:</u>	ailing Address:	Street Address:				
Ro	egistration Section	Registration Section				
	ivision of Corporations O. Box 6327	Division of Corporations The Centre of Tallahassee				
	allahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

DocuSign Envelope ID: EADB4462-6810-4081-93AA-393C42CA3F00 ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited lia Wilkinson Commercial Par				_·
2. The Articles of Organiza	tion were filed on	October 4, 2022	and assigned	
document number L2200	0428075			
Note: If the date inserted	tive date cannot be pri- in this block does no	or to or more than 90 days later t	han date document is received for filling; filling requirements, this date will n) iot be
4. A description of occurre 605.0707, Florida Statute	nce that resulted in s, (copy 605.0707	the limited liability compon back cover letter).	any's dissolution pursuant to sec	tion
90 consecutive days have p	`		2023 TAL	_
			ASSEE, FLORID	- K
If there are no members, activities and affairs:	enter the name an Robert Meyer		pointed to wind up the company'	s
	880 Glenwood	l Avenue SE, Suite H		
	Atlanta, GA 3	0316		_
	90 consecutive	e days have passed during wh	ich the LLC had no members.	_
6. Signature of an authoriz above to wind up the comp	ed person or if the any's activities and	re are no members, the sig Laffairs:	nature of the person appointed ar	nd lis
Muge		Robert Meyer		
Signatur			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	Wilkinson Commercial P	artners. LLC Dissolu	ution
Document number of Limited Liabil:		128075	
Date of dissolution was: July 17, 2023			
Description of information that must		claim:	
The request must contain the following	information: (a) name and	address of the claims	ant; (b) telephone number
(including area code) where claimant m	ay be contacted during nor	mal business hours c	oncerning the claim; (c)
description and amount of the claim: (d) the date(s) the transaction	or eventsgiving rise	to the claim arose or
occurred; and (e) any other pertinent in	formation and documentation	on concerning the cla	nim.
Mailing address where claims can be 880 Glenwood Avenue SE, Su Atlanta, GA 30316 A claim against the above named lin claim is commenced within 4 years a	nited liability company w	vill be barred unles	PILEL 2023 JUL 17 AM 10: 14 SLUGAL TARY OF STATE TALLAHASSEE. FLORIDA
Printed Name of the Person Fi	ling	Signatu	re of the Person Filing
Finited Name of the retson ru	me	5.6.1410	

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