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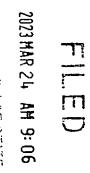
 	(Requestor's Name)	<u> </u>				
(Address)						
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	(City/State/Zip/Phone #)					
PICK-UI	P WAIT	MAIL				
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(Document Number)						
Certified Copies	Certificates of Statu	s				
Special Instructions	s to Filing Officer:					
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5/22/23 V:W



COVER LETTER

Mailing Address: Registration Section Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

TO: Registration Section Division of Corporations						
SUBJECT: LTalante Gents, LLC						
(Name of Limited Liability Company)						
The enclosed Articles of Dissolution and fee(s) are submitted for tiling						
Please return all correspondence concerning this matter to the following:						
Any La Galante						
(Name of Person)						
Cralante Gents, LLC						
(Firm/Company)						
8805 Tamiami Trail N #507						
(Address)						
Maples FL 34/00 (CityState and Zip Code)						
(City/State and Zip Cixle)						
For further information concerning this matter, please call:						
Any Ka Galante at 139, 877-6199 (Name of Person) (Area Code & Daytime Telephone Number)						
(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)						

Street Address: Registration Section Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

2. The Articles of Organization were filed on 10/0/22 and assigned document number 22000432558 3. The delayed effective date the dissolution if not effective on the date of filing: 3/21/2023 (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 (0)5.0707 on back cover letter). 4. Moving out of State 3025 Diffword Way 4. 3303 7. 3025 Diffword Way 4. 3303 7. 3025 Diffword Way 5. 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: 3025 Diffword Way 4. 3303 7. 3025 Diffword Way 4. 3303 7. 3025 Diffword Way 4. 3303 7. 3025 Diffword Way 5. 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: 3025 Diffword Name	1. The name of a limited liabil	ity company is	LLC		
3. The delayed effective date the dissolution if not effective on the date of filing: 3/21/20 33 (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). 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). 4. Any Agalante 30.25 Dr. Ftwood Way 15 4. Any Agalante 13. 30. 35 14. 30. 30 15. 30. 30 16. 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:				_ and assigned	
3. The delayed effective date the dissolution if not effective on the date of filing: 3/21/20 33 (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). 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). 4. Any Agalante 30.25 Dr. Ftwood Way 15 4. Any Agalante 13. 30. 35 14. 30. 30 15. 30. 30 16. 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:	document number	22000438	2558		
605.0707, Florida Statutes, (copy 605.0707 on back cover letter). Ynoving out of State 5. If there are no members, enter the name and address of the person appointed to wind up the company activities and affairs: Any Ya Galante 3025 Diffword Way H 707 H 707 108 5. 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:	3. The delayed effective date t (effective Note: If the date inserted in t	he dissolution if not effection date cannot be prior to or more the applicable block does not meet the applicable.	ve on the date of filing han 90 days later than date of oplicable statutory filing is	document is received for filing) requirements, this date will not	t be
5. If there are no members, enter the name and address of the person appointed to wind up the company activities and affairs: Any 49 Galante 3025 Driftwood Way 43003 Maples JJ 34109 The object to wind up the company's activities and affairs:	= 605.0707, Florida Statutes, (copy 605.0707 on back cov	er letter).	ssolution pursuant to section	η
activities and affairs: Any Ag Galante 3025 Driftwood Way 32 # 3303 Maples ## 34109 The 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:					
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# 3303 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:		er the name and address ofAmy4g	the person appointed to	o wind up the company	-17
Maples 44 34109 75 8 5. 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:		3025 [n'ftwood	Way 2	: [
5. 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:		# 3202		SSE	בּ קיי
above to wind up the company's activities and affairs:		Maples	FF 34	1109 理	ა ენ
Statalet Any M La Galante	Signature of an authorized pabove to wind up the company	erson or if there are no mer s activities and affairs:	nbers, the signature of	the person appointed and li-	sted
Nutrature / Dent of Man.	Sa Pal	will	Any WI	La Galar	nte

FILING FEE: \$25.00