L22000438456

(Requestor's Name)						
(Address)						
(Address)						
(City/S	State/Zip/Phon	e #)				
PICK-UP	☐ WAIT	MAIL				
(Busin	ess Entity Nai	me)				
(Docu	ment Number))				
Certified Copies	Certificate	s of Status				
Special Instructions to Filing Officer:						

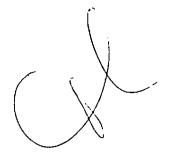




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01/22/24--01015--011 **25.00

2024 JAN 22 AM II: II



COVER LETTER

	istration Section 5 ision of Corporations			,
	G & P Restaurant Management LLC			
SUBJECT:	(Name of Limit	ted Liability Company)		_
	Articles of Dissolution and fee(s) are submit all correspondence concerning this matter to			
	Raquel Gallo			
	(Na	me of Person)		
	G & P Restaurant Management LLC		SEC	2021 IAN 22
	(Fir	m Company)		Ž
	345 Lemon St			
		(Address)	SE E	子二: 一
	Palm Harbor, Fl 34683		FL	Ξ
	(City/St	ate and Zip Code)	171	
For further in	nformation concerning this matter, please call	l:		
Ant	hony Gallo	516 640	-2446	
	(Name of Person)		ytime Telephone Number)	
Enclosed is a c	check for the following amount:			
	,00 Filing Fee and Certificate of Dissolution	□ \$55.00 Filing Fee. Cer Certified Copy cadd	rificate of Dissolution & itional copy is enclosed)	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corpora The Centre of Talla 2415 N. Monroe St Tallahassee, FL 323	ations thassec reet, Suite 810	

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

١.	The name of a limited liabil	ity company is		
	G & P RESTAURANT MAN	AGEMENT, LLC		
2.	The Articles of Organizatio	n were filed on $\frac{10/12}{1}$	2022	and assigned
	document number <u>L220004</u> .	8456		
3.		his block does not mee	t the applicable statutory fi	Tling: 12/1/2023 date document is received for filing) iling requirements, this date will not be
4.	A description of occurrence 605.0707, Florida Statutes, (that resulted in the li copy 605,0707 on ba	imited liability company ick cover letter).	's dissolution pursuant to section
	Company was not activated or			
5.	If there are no members, enactivities and affairs:	er the name and addi Raquel Gallo	ress of the person appoir	SELIARY OF STATE
		345 Lemon St		
		Palm Harbor, FL 346	583	
6. ab	Signature of an authorized pove to wind up the company	person or if there are a statistics and affair	no members, the signaturs:	re of the person appointed and listed
$\overline{}$	// Signature		Pr	inted Name

FILING FEE: \$25.00