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(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	(Re	questor's Name)			
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J. HORNE APR 2 6 2024					

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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: GRATITUDE V) ATER		
(Name of Limited Li	ability Company)		
The enclosed Articles of Dissolution and fee(s) are submitted for	or filing.		
Please return all correspondence concerning this matter to the fe	ollowing:		
Marcelino R	2. JaeL		
GRATITUDE	WATER		
(Firm/Company)			
3944 N.E. 167	St. 7 105		
Wath Miami Beach, FL 33160 (City/State and Zip Code)			
For further information concerning this matter, please call:			
Marcelino Z. Jael (Name of Person)	at (786) 385 - 42 04 (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:	Street Address:		
Registration Section	Registration Section Division of Corporations		
Division of Corporations P.O. Box 6327	The Centre of Tallahassee		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

2024 APR 16 AM 9: 25

1. The name of a limited liability company is GRATITUDE	WATER	AH 9:25
2. The Articles of Organization were filed on	• ,	
document numberL_220093	9372 - La	42000439372
3. The delayed effective date the dissolution if teffective date cannot be prior Note: If the date inserted in this block does not listed as the document's effective date on the Do	to or more than 90 days later meet the applicable statuto	than date document is received for filing) ry filing requirements, this date will not
4. A description of occurrence that resulted in t 605.0707, Florida Statutes, (copy 605.0707 o	n back cover letter).	1
and NO Pu	t Fur chase	orders
·		
5. If there are no members, enter the name and activities and affairs:	address of the person app	
3944	N.E - 167	st. # ns
N.N.	B. FL. 3	3160
 Signature of an authorized person or if there above to wind up the company's activities and a 	are no members, the sign	sature of the person appointed and lis
Kulin P. Char	L Marci	elino R. JaeL
Signature	LING FEE: \$25.00	Printed Name