## L2300041810

(Requestor's Name)	
(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:	
J. HORNE APR 16 2024	

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100426516451

09/26/24--01021--021 \*\*25.00



## **COVER LETTER**

Division of Corporations		
SUBJECT: TX Venice Jacaranda, LLC.		
(Name of Limited L	iability Company)	
The enclosed Articles of Dissolution and fee(s) are submitted f	or filing.	
Please return all correspondence concerning this matter to the following:		
Lisa Oldenburg (Name of	Person)	
Tommy's Express Holdings (Fint/Company)		
1800 2nd St. Suite 3	i02	
_	ress)	
SUMSOTA, FL 34236 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Lisa Oldenburg (Name of Resion)	at (941) 737 - 7545 (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 &	
<b>A</b>	Certified Copy (additional copy is enclosed)	
No. 22 con Addisons	Street Address:	
- <u>Mailing Address:</u> Registration Section	Registration Section	
Division of Corporations	Division of Corporations The Centre of Tallahassee	
P.O. Box 6327 Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	
Tananasses, 1 B 3 B 1 1	Tallahassee, FL 32303	

## ARTICLES OF DISSOLUTION FILED FOR A LIMITED LIABILITY COMPANY 2024 MAR 26 PM 12: 2

1,	The name of a limited liability company is
	TX Venice Jacaranda, LLC
2.	The Articles of Organization were filed on NOVEMBER 8, 2022 and assigned
	document number <u>L22000439810</u>
3.	The delayed effective date the dissolution if not effective on the date of filing: \( \sum_{\text{(effective date cannot be prior to or more than 90 days later than date document is received for filing)} \( \sum_{\text{Note:}} \) 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).
	The purpose for which the LLC was created has
	expired and the LLC has disposed of all of its
	assets and is no longer needed
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
6. abo	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:
	Signature VIN VUICATAGE Printed Name
	FILING FEE: \$25.00