Laa000501amo

- (Reques	tor's Name)		
(Address	j)		
(Address	;)		
(Ĉity/Sta	te/Zip/Phone #)		
PICK-UP	WAIT MAIL		
(Busines	ss Entity Name)		
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			
J.	HORNE JL - 12 2024		

Office Use Only



100430642771

05/30/24--01024--008 **25.00

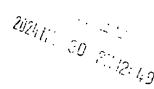


COVER LETTER

• • •

TO:		ration Section on of Corporations			
SUBJE		EALTY MANAGEMENT OF FORT LAU	DERDALE LLC		
., 0 130 13	··· _	(Name of Limited Liability Company)			
		rticles of Dissolution and fee(s) are submitted correspondence concerning this matter to t	-		
		TYLER GOLD, ESQ.			
		(Nam	e of Person)		
		TYLER A. GOLD, P.A.			
	(Firm/Company)		/Company)		
	1250 SOUTH PINE ISLAND RD., SUITE 200		E 200		
	(Address)		(ddress)		
	PLANTATION, FLORIDA 33324				
		(City/Stat	e and Zip Code) *		
For furth	ner info	rmation concerning this matter, please call:			
	TYLE	R GOLD	954 565-5577 at ()		
		(Name of Person)	at () (Area Code & Daytime Telephone Number)		
Enclosed	is a chec	ck 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)		
	Regis Divisi P.O. I	g Address: tration Section ion of Corporations Box 6327 nassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY



1.	The name of a limited liability company is REALTY MANAGEMENT OF FORT LAUDERDALE LLC
2.	The Articles of Organization were filed on 12/02/2022 and assigned
	document number 1.22000507216
3.	The delayed effective date the dissolution if not effective on the date of filing: MAY 14, 2024 (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).
	CONSENT OF ALL OF THE MEMBERS
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. ab	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:
_	Deh (1/60) ROBERT C. MADDUX
	Signature Printed Name

FILING FEE: \$25.00