L22000510535

(Requestor's Name)
(Address)
(Address)
(1001033)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Coomoo Line)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





900419287159

12/11/23--01083--024 **25.00

SECULIARY OF STATE

TILED

COVER LETTER

Division of Corporations
SUBJECT: Continue To Learn
(Name of Limited Liability Company)
The enclosed Articles of Dissolution and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Joan McGhee
(Name of Person)
Continue lo Learn (Firm/Company)
291 Sevret Way (Address) Cassel Berry FL 32707 (City/State and Zip Code)
(Address)
Casselberry + 32707
(Cily/State and Zip Code)
For further information concerning this matter, please call:
2
Joan MCGhel at (407) 221 0845 (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 S55.00 Filing Fee, Certificate of Dissolution &
Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, 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

2. The Articles of Organization were filed on December 5, 2022 and assigned document number	1
3. The delayed effective date the dissolution if not effective on the date of filing: Duck by 20, 6 (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	1
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will	1
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to sect 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).	ion :
The Company is not profitable	= 11
Y OF PR	m
5. If there are no members, enter the name and address of the person appointed to wind up the companion activities and affairs:	
291 Secret Way	_
. Casselberry FL 32707	-
6. Signature of an authorized person or if there are no members, the signature of the person appointed and above to wind up the company's activities and affairs:	Hlisted
Joan Mahre Joan Mahe	₽ .

FILING FEE: \$25.00