

L 22000510810

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

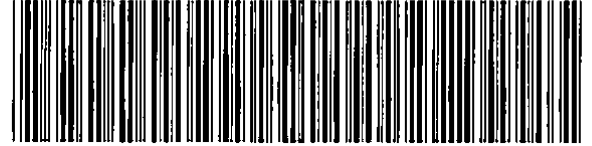
(Document Number)

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2024 APR 25 PM 1:15  
SEC  
TALLAH

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LYDIAN CAPITAL GROUP, LLC

(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:

Miguel Perez

(Name of Person)

(Firm/Company)

340 W. Flagler St. #1410

(Address)

(City/State and Zip Code)

For further information concerning this matter, please call:

Miguel Perez

(Name of Person)

305

321-0395

at ( )

(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:**

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**

1. The name of a limited liability company is  
LYDIAN CAPITAL GROUP, LLC

2. The Articles of Organization were filed on 12/05/2022 and assigned  
document number 1.22000510870

3. The delayed effective date the dissolution if not effective on the date of filing: 02/01/2024  
(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).  
The consent of all the members not to conduct business operations under this entity ever and  
to ensure that such entity is for ever devolved.

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. Signature of an authorized person or if there are no members, the signature of the person appointed and listed  
above to wind up the company's activities and affairs:

Miguel Perez  
Signature

Miguel Perez

Printed Name

**FILING FEE: \$25.00**

2024 APR 25 PM 1:15  
SECTION 605.0707  
FILED

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## Notice of Limited Liability Company Dissolution

**NOTE: This page is optional**

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: LYDIAN CAPITAL GROUP, LLC

Document number of Limited Liability Company is: L22000510870

Date of dissolution was: 02/01/2024

Description of information that must be included in a written claim:

The consent of all the members not to conduct business operations under this entity ever and  
to ensure that such entity is for ever devolved.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Miguel Perez

340 W. Flagler St. #1410

Miami FL 33130

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Miguel Perez

Printed Name of the Person Filing

Miguel Perez

Signature of the Person Filing

**Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00**

FILED

2024 APR 25 PM 1:15

SECRET