

L220000520779

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

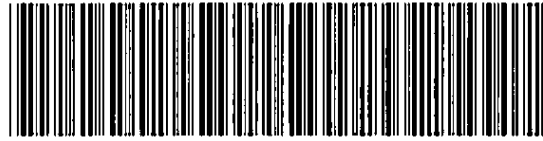
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JUL 22 PM 12:08
TAXY OF STATE
FL

2023 JUL 22 PM 3:11



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: I20000000088

Date: 06/28/2023

Name: Jennifer Bialowas

Reference #: 2038142

Entity Name: WOWO LARGO LLC

- Articles of Incorporation/Authorization to Transact Business
- Amendment
- Change of Agent
- Reinstatement
- Conversion
- Merger
- Dissolution/Withdrawal
- Fictitious Name
- Other _____

Please retain original submission date

Authorized Amount: 25.00

Signature: 



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 23, 2023

COGENCYGLOBAL

SUBJECT: WOWO LARGO, LLC
Ref. Number: L22000520779

We have received your document for WOWO LARGO, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FOREIGN LIMITED LIABILITY COMPANY, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. ~~Please complete and return the enclosed blank form(s).~~

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan
Regulatory Specialist III

Letter Number: 023A00014269

DB

2023 JUN 28 PM 3:14

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

FILED

1. The name of a limited liability company is _____
WOWO LARGO LLC

2023 12 22 PM 12:08

2. The Articles of Organization were filed on _____ 12/13/2022 _____ and assigned
document number _____ L22000520779

SECRETARY OF STATE
TALLAHASSEE, FL

3. The delayed effective date the dissolution if not effective on the date of filing: _____
(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).
winding up business

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
Michael Alterman
3715 Northside Parkway
Suite 4-525
Atlanta, GA 30327

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:

Michael Alterman
Signature

/s/ Michael Alterman
Printed Name

FILING FEE: \$25.00