123000002280

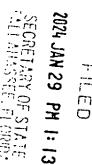
(Requestor's Name)				
(Address)				
(Addre	ss)			
(City/Si	tate/Zip/Phone #)			
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to Filing Officer:				
	JD: WS			
	11.12.11			

Office Use Only



200422635072

01/29/24--01020--012 **55.00



COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJI	Morris Outfitters L.L.C.					
(Name of Limited Liability Company)						
	closed Articles of Dissolution and fee(s) are submit return all correspondence concerning this matter to					
	Luke F. Morris					
	(Name of Person)					
	Morris Outfitters L.L.C.					
	(Firm/Company)					
	1628 Parilla Circle					
	(Address)					
	Trinity, FL 34655					
	(City/Sta	te and Zip Code)				
For fu	rther information concerning this matter, please call	:				
	Luke F. Morris	410 982-1677 at ()				
	(Name of Person)	(Area Code & Daytime Telephone Number)				
Enclose	ed 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		Street Address: Registration Section				
	Division of Corporations	Division of Corporations				
	P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	FOR	124
A LI	IMITED LIABILITY COM	ON PANY and assigned
The name of a limited liability con	mpany is	
Morris Outfitters L.L.C.		
		· · · · · · · · · · · · · · · · · · ·
The Articles of Organization were	e filed on December 28, 2022	and assigned
document numberL23000002280		
The delayed effective date the diss	colution if not affective on the de	ste of filing: 12/31/2023
Tenecuve date car	ock does not meet the applicable stat	utory filing requirements, this date will not
A description of occurrence that re 605.0707, Florida Statutes, (copy 6	esulted in the limited liability co 605.0707 on back cover letter).	mpany's dissolution pursuant to section
Will fulltime career I do not have the	capcity to continue to run the busine	ess and also perform my regular duties
since ceased.		
If there are no members, enter the	name and address of the person	appointed to wind up the company's
activities and affairs:		·
		
. Signature of an authorized person bove to wind up the company's acti	or if there are no members, the ivities and affairs:	signature of the person appointed and li
lo L. Merouis	Luke F. Mor	τis

FILING FEE: \$25.00

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:	
Document number of Limited Liability Company is:	
12/31/2023	<u> </u>
Date of dissolution was:	
Description of information that must be included in a written claim:	三 三 子 子 ラ ニ ラ ニ ラ ニ ー
	野之
	129 P
	F 3 1
	32 3
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporate	ions)
Luke F. Morris	
1628 Parilla Circle	
Trinity, FL 34655	
·	
A claim against the above named limited liability company will be barred unless a proceeding	g to enforce the
claim is commenced within 4 years after the filing of this notice.	
0	
Luke F. Morris Luke F. Morris	
Printed Name of the Person Filing Signature of the Person F	iling

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