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2024 J.M. 18 AVIO: 17

## **COVER LETTER**

Registration Section

TO:

Division of C	orporations					
SUBJECT:	TRINI DES	SIRES				
	(Name of Limit	ed Liability Company)				
The enclosed Articles of	of Dissolution and fee(s) are submit	ted for films				
Please return all corres	pondence concerning this matter to	the following:				
	CAROL-AN	N DIERRÉ				
CAROL-ANN PIERRE (Name of Person)						
		06.466				
	TRINI DESIRES. (Firm/Company)					
	(Fin	n/Company)				
	30868 LINDENT	REE DR. WESLEY CHAPEL				
	,	Address)				
	4L.	33543. te and Zip Code)				
	(City/Sta	te and Zip Code)				
For further information	concerning this matter, please call:					
C. 001	N - ANN PIEBER	012 106 2015.				
_ CAR	(Name of Person)	a) = 813, 696 2915 (Area Code & Daytime Telephone Number)				
Englosed is a check for the	e following amount:					
<b>⊆</b> \$25.00 Filing F	ee and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)				
Scalling Addr	INCC*	Street Address:				
Registration Section		Registration Section				
	Corporations	Division of Corporations				
P.O. Box 63	<del>-</del> :	The Centre of Tallahassee				
Tallahassee.	FL 32314	2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

## RTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	A LIMITED	<b>FOR</b> LIABILITY (	COMPANY	2024 JAN	ED
1. The name of a limite	ed liability company is	RINI	DESIRES.	2024 JAN 18	9110:17 Str
The Articles of Orga	nnization were filed on _				
document number_	L2300004	3770			
Note: If the date insolisted as the document	re date the dissolution if effective date cannot be prior erted in this block does not it's effective date on the Do	r to or more than 90 meet the applicab epartment of State	days later than date doct le statutory filing reques records.	ument is received for filing irrements, this date will	not be
605.0707, Florida Sta	urrence that resulted in tatutes, (copy 605:0707 o	n back cover let	ter).	•	
NO	ACTIVITY	SINCE	COMP ANY	STARIED.	
i	· · ·				
					_
5. If there are no memb	ers, enter the name and	address of the po	erson appointed to w	ind up the company	<del>-</del> 5
activities and affairs					<del>-</del>
	CAROL-1	ANN PIEN	CRE -308	68 Lindentreo 1	er Verlay Claye
	FREDERIC	K WHIT	TINCTON -308	68 Lindertreads,	Ucday Cagnet -37543
					- -
6. Signature of an author above to wind up the co	orized person or if there mpany's activities and a	are no members. frairs:	the signature of the	person appointed an	d listed
Can - Can	- Pierie		CAROL- AN	N PIERRE	_

FILING FEE: \$25.00