L23000047442

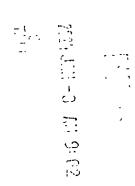
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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COVER LETTER

Registration Section

TO:

Division of Corporations			
SUBJECT: FANTASTIC EWELS LLC (Name of Limited Liability Company)			
(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	e following:		
Phikip L. GRE	EN of Person)		
FANTASTIC JEWELS LLC (Firm/Company)			
(Firm/Company)			
9290 SW 203 RD AVENUE			
DUNNELLON, FLORIDA 34431-5760 (City/State and Zip Code)			
For further information concerning this matter, please call:			
Philip GREN (Name of Person)	at (630)650 - 8400 (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:	Street Address:		
Registration Section	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

1.	The name of a limited liability company is
	FANTASTIC jewers LLC
2.	The Articles of Organization were filed on $0/25/23$ and assigned
	document number <u>L23000047442</u>
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).
	No PROFIT
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Dhi up 1. GREEN
	9290 SW 20330 AVENUE
	DUNNELLON, FLORISA
	34431-5760
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:
V	Phillip L. GREEN Printed Name

FILING FEE: \$25.00