# 23000047681

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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# Incorporating Services, Ltd.

incserv<sup>o</sup>

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

# ORDER FORM

**TO** Florida Department of State

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com 850-245-6051 FROM

Melissa Moreau mmoreau@incserv.com 850.656.7953

**REQUEST DATE** 2/24/2023

**PRIORITY** Regular Approval

OUR REF # (Order ID#) 1124414

ORDER ENTITY
AH HOLDCO LLC

#### PLEASE PERFORM THE FOLLOWING SERVICES:

AH HOLDCO LLC (FL)

File the attached dissolution document

#### NOTES:

\$25.00 Authorized

#### **RETURN/FORWARDING INSTRUCTIONS:**

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely.

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Friday, February 24, 2023 Page 1 of 1

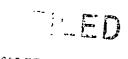
# **COVER LETTER**

TO:

Registration Section Division of Corporations

AH HOLDCO LLC SUBJECT:			
(Name of Limited Liability Company)			
The enclosed Articles of Dissolution and fee(s) are submitted	ed for filing.		
Please return all correspondence concerning this matter to t	he following:		
V			
Yanir Shmaryou			
(Nam	e of Person)		
(Firm Company)			
1661 West Avenue, Unit 398627			
(/	Address)		
Miami Beach, FL 33239			
(City/Stat	e and Zip Code)		
For further information concerning this matter, please call:			
Marlene James	305 740-1936 at ( )		
(Name of Person)	(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



2023 FEB 24 AM 10: 36

The name of a limited liab     AH HOLDCO LLC	oility company is	NEW YOF STATI
2. The Articles of Organizat	ion were filed on January 25, 2023	and assigned
document number L23000	0.47681	
Note: If the date inserted in	the dissolution if not effective on the date we date cannot be prior to or more than 90 days later in this block does not meet the applicable statute ective date on the Department of State's record	ory filing requirements, this date will not be
4. A description of occurrence 605.0707, Florida Statutes	ce that resulted in the limited liability comp., (copy 605,0707 on back cover letter).	pany's dissolution pursuant to section
Voluntary consent of member		
5. If there are no members, e	inter the name and address of the person ap Yanir Shunaryon	ppointed to wind up the company's
	1661 West Avenue, Unit 398627	
	Miami Beach, FL 33239	· · · · · · · · · · · · · · · · · · ·
6. Signature of an authorized above to wind up the compar	l person or if there are no members, the signy's activities and affairs:	enature of the person appointed and listed
iii Shmaryou (Feb 23, 2073 14:09 EST)	Yanii Shmaryo	u
Signature		Printed Name

**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: AH HOLDCO LLC	
Document number of Limited Liability Company is: 1,23	000047681
Date of dissolution was: February 23, 2023	7927
Description of information that must be included in a wr	. 11
Name of claimant, address of claimant, amount of claim, reas	on for claim.
	O: 36
Mailing address where claims can be sent: (Claims cann	ot be sent to the Division of Corporations)
Yanir Shmaryon	
1661 West Avenue, Unit 398627	
Miami Beach, FL 33239	
A claim against the above named limited liability compactain is commenced within 4 years after the filing of thi	
Yauir Shmaryon	Yame Shinaryou (Feb 23, 2021 14,009 ESF)
Printed Name of the Person Filing	Signature of the Person Filing

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