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PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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03/29/24 -01014--001 **25.00



COVER LETTER

TO:

Registration Section

Division of Corporations		
SUBJECT: TX Tampa Williams (Name of Limited I.)	LLC. Liability Company)	
The enclosed Articles of Dissolution and fee(s) are submitted to the Please return all correspondence concerning this matter to the		
LISA OIDENBURG (Name of	Person)	
Tommy's Express Ho	dings	
1800 2nd St. Suite	102 (ress)	
Sarasota, FL 34236 (City/State and Zip Code)		
For further information concerning this matter, please call:		
CISA OIDENBURG (Name of Person)	at (941) 737 - 7545 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount: \$\times \times \ti	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 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
IX Tampa Williams LLC
- TO TOUR VILLIAND
2. The Articles of Organization were filed on FC boung 28, 2023 and assigned
document number <u>L2300100552</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).
The purpose for which the LLC was created
has expired and the LLC has disposed of all of
1ts assets and is no longer meded.
1 1/A
activities and affairs:
6. Signature of an authorized person of if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:
Dan Dykgraaf
Signature Printed Name
FILING FEE: \$25.00
/