LZ3000118208

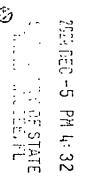
(R	equestor's Name)	
(A	ddress)	
·	,	
(A	ddress)	
(C	ity/State/Zip/Phone #	f)
PICK-UP	MAIT	MAIL
(B	usiness Entity Name)
(D	ocument Number)	
Certified Copies	Certificates o	f Status
Special Instructions to	Filing Officer.	
	•	
L. <u>.</u>		

Office Use Only



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COVER LETTER

TO:

Registration Section
Division of Corporations

Tallahassee, FL 32314

SUBJECT: TYO Drones ENI. (C			
(Name of Limited	Liability Company)		
The enclosed Articles of Dissolution and fee(s) are submitted	l for filing.		
Please return all correspondence concerning this matter to the	e following:		
Mariana Lucianada			
Mariand Luyando	of Person)		
J (Name	of Person)		
Day Day on tall	1/0		
tro prones Eni.			
(Firm/	Company)		
1x00 T in in	love all		
1848 Turgouise Waves, CV			
· · · · (Ac	ddress)		
Lincing D 2	רין נרון		
hissimmee, FC 3	4747		
(City/State	and Zip Code)		
For further information concerning this matter, please call:			
	0 - 00/11 []		
Mariano luyando	at (219) 805-2256		
(Name of Person)	(Area Code & Daytime Telephone Number)		
•			
Enclosed is a check for the following amount:	□ \$55.00 Filing Fee, Certificate of Dissolution &		
	Ties w		
\$25.00 Filing Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & ☐ ☐ ▷ Certified Copy (additional copy is enclosed)		
	Centiled Copy (additional copy is enclosed)		
N	e		
Mailing Address: Registration Section	Street Address: Registration Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327	The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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: YO Drones ENT. CCC	_
Document number of Limited Liability Company is: <u>L230001 8208</u>	
Date of dissolution was: 11/17/2024	
Description of information that must be included in a written claim:	
NIA	
	(n)
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corp	oorations)
NIA	porations) STATE
	_
	_
A claim against the above named limited liability company will be barred unless a proceed claim is commenced within 4 years after the filing of this notice.	eding to enforce the

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