123000212250

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



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03/14/24--01017--017 **25.00



COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registratio Division of	on Section f Corporations	•
SUBJECT:	1991 MARY, 1 (Name of Limited	」して I Liability Company)
The enclosed Articl	tes of Dissolution and fee(s) are submitte	d for filing.
Please return all cor	rrespondence concerning this matter to the	ne following:
	TIMUTHY MA	of Person)
_	(Firm	/Company)
	TIOU SUNSHINA S	kyway Lnj, Vnit 29/
_	St, Reterstoria 1	e and Zip Code)
For further informa-	tion concerning this matter, please call:	
TIM	(Name of Person)	at (Clb) 46v-946v-(Area Code & Daytime Telephone Number)
Enclosed is a check for	or the following amount:	
⊑∕s25.00 Filii	ng Fee and Certificate of Dissolution	□ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)
Mailing A		Street Address:
	tion Section of Corporations	Registration Section Division of Corporations
P.O. Box		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 liab	ility company is			
1811 W	ARVY, LLC			
2. The Articles of Organization	on were filed on	•	and assigned	
document number <u>LZ</u>	3000000000	_		
3. The delayed effective date (effective Note: If the date inserted in listed as the document's effective date.	this block does not meet th	e applicable statutory fil		
4. A description of occurrence 605,0707, Florida Statutes.	e that resulted in the limi (copy 605,0707 on back	ted liability company' cover letter).	s dissolution pursu	ant to section
INACTIVE	AND NEVER	VIED		
				702
5. If there are no members, ea	nter the name and address	of the person appoint	ted to wind un the d	ompanys II
activities and affairs:	THOMIT	MALKACIAN)	- 4 - 4
	7100 Sungh	ine Stywar	2 Ln 5, V-	1. + 2P)
5. If there are no members, eractivities and affairs:	51. Redys	burg , FL	37711	2: 25
6. Signature of an authorized above to wind up the company	person or if there are no y's activities and affairs:	members, the signatur	e of the person app	oointed and listed
031-	~			,
	~	J/m OTA	Y MALKA	5.00
Signature		Dri	nted Name	

FILING FEE: \$25.00