123000224116

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:





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TALLAHASSEE, FLORID

023 NOV -3 AM 10: 2

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Pora Artic Air LLC (Name of Limited Liability Company)
(Name of Emiliary Company)
The enclosed Articles of Dissolution and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Aisvany Hernandez Cabrera (Name of Pergin)
(Firm/Company)
7675 Tara Cir Apt 204 (Address)
Noples Florida 34104 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) Abera at (78b) 6/3 1705 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S25 00 Filing Fee and Certificate of Dissolution □ \$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 No te: I already Sent a check of \$25.00.



October 11, 2023

LISVANY HERNANDEZ CABRERA 7675 TARA CIRCLE APT 204 NAPLES, FL 34104

SUBJECT: PURE ARTIC AIR LLC Ref. Number: L23000224116

We have received your document for PURE ARTIC AIR LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Complete the Articles of Dissolution.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Letter Number: 023A00023596

Neysa Culligan Regulatory Specialist III

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1-11 E.D 2023 NOV -3 AM 10: 23

1.	The name of a limited liability company is $737775 - 663$
	PURE ARTIC AIR LLC TALLAHASSEE, FLORIDA
2.	The Articles of Organization were filed on $\frac{05/05/2023}{42023}$ and assigned document number $\frac{423000224116}{423000224116}$
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 hability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter). I want to close it.
-	If there are no members, enter the name and address of the person appointed to wind up the company's
2.	activities and affairs: Aisvany Hernandez Cabrera Hernandez Cabrera Waples, FL 34104
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 ompany's activities and affairs:
	Signature Lisvany Hernan dez Cabrera Printed Name
	V V Signature / Printed Name

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

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: Punt Antie An UC.		
Document number of Limited Liability Company is: <u>LZ3000 ZZG/1/6</u>		
Date of dissolution was:08/18/2023		
Description of information that must be included in a written claim:		
I want to caved because conflicts a a company that have almost the name.	wet,	6
a company that have almost the	5cm	u
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ATTACK ASS	- V	
E.C. C.C.	———— ————————————————————————————————	rn
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporation)	AM 10: 23	
USVAN Hernander CAlonera	23	
USVANY Hernander CAbrera TATS TARA CIA APT 204		
NAPLES FL 34/04		

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

USVANY HERWANDEE CABOREA.

Printed Name of the Person Filing

Signature of the Person Filing