L2300025513Z

| (Requestor's Name) | | | |
|---|--|--|--|
| (Address) | | | |
| (Address) | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | |
| | | | |
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12/20/24--01013--018 **55.00

FEB 05 = S. PRATHER

COVER LETTER

| TO: Registration Section Division of Corporations | | | | |
|--|---|--|--|--|
| SUBJECT: DNA Specialty Steel CON, L.L.C. (Name of Limited Liability Company) | | | | |
| (Name of Limited | Liability Company) | | | |
| | | | | |
| The enclosed Articles of Dissolution and fee(s) are submitted for filing. | | | | |
| Please return all correspondence concerning this matter to the following: | | | | |
| Anthony Lee Rogers | | | | |
| DNA Specialty Steel CON (Firm/Company) | | | | |
| 250 Bayoo Bend LawE | | | | |
| Calloway Florida (City/State and Zip Code) | | | | |
| For further information concerning this matter, please call: | | | | |
| Anthory Lee Rogers (Name of Person) | at (706) 263 - 8749 (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: Registration Section | Street Address: Registration Section | | | |
| Division of Corporations | Division of Corporations | | | |
| P.O. Box 6327 Tallahassee, FL 32314 | 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 con DNA Special | | (01 | 1.60 | |
|---|---|--|---|---|
| 2. The Articles of Organization were | • | | | - |
| document number | | - | | |
| 3. The delayed effective date the dissective date can Note: If the date inserted in this blo histed as the document's effective date. | ck does not meet the a | applicable statutory | filing: 10 - 5 n date document is receive filing requirements, this | -2024 ed for filing) s date will not be |
| 4. A description of occurrence that re 605.0707, Florida Statutes, (copy 6 | esulted in the limite 605.0707 on back co | d liability companyover letter). USE Of | y's dissolution pursua | ant to section 24 12-0 |
| Date moved | | | | ~ ~ |
| 5. If there are no members, enter the | name and address c | of the person appoi | nted to wind up the c | ompany's |
| activities and affairs: | | | - | |
| 6. Signature of an authorized person above to wind up the company's active | or if there are no m | embers, the signat | ure of the person app | ointed and listed |
| ath Skore | | Anthony | Lee Koge | <u> </u> |

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: | |
|---|--------------------------------|
| Document number of Limited Liability Company is: | |
| Date of dissolution was: $OC+ 18\% 2023$ | |
| Description of information that must be included in a written el | aim: |
| Moved out of Flor | ida |
| | |
| | Σ', • |
| | · ; |
| | |
| | <u> </u> |
| A claim against the above named limited liability company will | |
| claim is commenced within 4 years after the filing of this notice | |
| Arthoug Lee Rogers Printed Name of the Person Filing | |
| 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