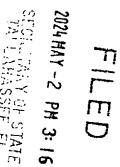


Office Use Only



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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the form and instructions to dissolve a Florida Limited Liability Company.

A limited liability company can voluntarily dissolve by filing articles of dissolution with the Division of Corporations that meet the requirements of 605.0707, Florida Statutes.

The fees are as follows:

\$25.00 Filing Fee and automatic certificate of dissolution \$30.00 Certified copy (optional)

Submit one check made payable to the Florida Department of State. Please include a cover letter containing your telephone number and return address. A letter of acknowledgment and certificate of dissolution will be issued after the dissolution has been filed.

Any further inquiries on this matter should be directed to the Registration Section by calling (850) 245-6051, or by writing Division of Corporations. P. O. Box 6327, Tallahassee, FL, 32314.

NOTE: THIS FORM FOR FILING ARTICLES OF DISSOLUTION IS BASIC. EACH LIMITED LIABILITY COMPANY IS A SEPARATE ENTITY AND AS SUCH HAS SPECIFIC GOALS, NEEDS, AND REQUIREMENTS. ADDITIONAL SHEETS MAY BE ATTACHED AS REQUIRED.

THE DIVISION OF CORPORATIONS RECOMMENDS THAT ALL DOCUMENTS BE REVIEWED BY YOUR LEGAL COUNSEL. THE DIVISION IS A FILING AGENCY AND AS SUCH DOES NOT RENDER ANY LEGAL, ACCOUNTING, OR TAX ADVICE. THE PROFESSIONAL ADVICE OF YOUR LEGAL COUNSEL TO ASCERTAIN EXACT COMPLIANCE WITH ALL STATUTORY REQUIREMENTS IS STRONGLY RECOMMENDED.

COVER LETTER

	Registration Section Division of Corporations				
SUBJEC	Synargy Solutions T:				
OBODO	(Name of Limited Liability Company)				
The encle	osed Articles of Dissolution and fee(s) are submit	tted for filing			
	turn all correspondence concerning this matter to	-			
	·	_			
	Devon Nobrega				
	(Na	me of Person)			
	Synargy Solutions				
	(Firm/Company)				
	6688 Portside Dr				
	(Address)				
	Boca Raton, Fl 33496				
	(City/St	ate and Zip Code)			
or furthe	er information concerning this matter, please call	l:			
	Devon Nobrega	33496 at (561-945-3197		
-	(Name of Person)	(Area Co	de & Daytime Telephone Number)		
Enclos ed i	s 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:	Street Address:	<u>:</u>		
	Registration Section	Registration Section			
	Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee			
Tallahassee, FL 32314		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 Synargy Solutions		
2.	The Articles of Organization were filed on	5-1-2023	and assigned
	document number CP 575 G		
3.	The delayed effective date the dissolution if (effective date cannot be prio Note: If the date inserted in this block does not listed as the document's effective date on the D	t meet the applicable statutory filing re	edificite is received for tilling)
4.	A description of occurrence that resulted in 605.0707, Florida Statutes, (copy 605.0707 c	the limited liability company's disson back cover letter).	olution pursuant to section
	Did not start the Business	•	202 0
			F TI
		<u></u>	SS 3 M
			<u> </u>
5.	If there are no members, enter the name and	laddress of the person appointed to	wind up the company's
	activities and affairs:		
		· · · ·	
6. ab	Signature of an authorized person or if there ove to wind up the company's activities and	e are no members, the signature of t affairs:	he person appointed and listed
	Devon Nobrega	Devon Nobrega	
	Signature	Printed 1	Name

FILING FEE: \$25.00