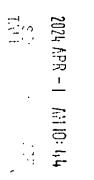


(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
		<u></u>
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
0.05.10		10
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
Lunaila	`	
UMIL	<u>`</u>	





04/01/24--01017--008 **25.00



COVER LETTER

Division of Corporations		
SUBJECT: PURPLE DOOR 391, LLC		
	Name of Limited Liabi	lity Company
Dear Sir or Madam:		
The enclosed Statement of Terminat	ion and fee(s) are submi	ited for filing.
Please return all correspondence con	cerning this matter to the	e following:
StephanieHarris		
Name of Perso	on	
Firm/Compan	ý	
PO BOX 223656		
Address		
West Palm Beach, FL 33422		
City/State and Zip Co	ode	
sharrislaw@hotmail.com		
E-mail address: (to be used for futu	re annual report notifica	tion)
For further information concerning t	his matter, please call:	
Stephanie Harris	at (⁵⁶¹	721-6484
Name of Person		Daytime Telephone Number
Mailing Address:	<u>•</u>	Street Address:
Registration Section		Registration Section
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314		The Centre of Tahahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E141 (2/14)

TO: Registration Section

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is PURPLE DOOR 391, ELC
2.	The Articles of Organization were filed on $\frac{06/08/2023}{}$ and assigned
	document number 1.23000277617
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.
1 .	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707. Florida Statutes, (copy 605.0707 on back cover letter).
	The consent of all the members.
	2024 5.1.1.1
	2024 APR
	7 A A A A A A A A A A A A A A A A A A A
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs:
6. at	Signature of an authorized person or if there are no members, the signature of the person appointed and listed love to wind up the company's activities and affairs:
	Stephanie Harris
	Signature Printed Name FILING FEE: \$25.00

THE