U23660317241

(Re	equestor's Name)			
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status _		of Status		
Special Instructions to Filing Officer:				
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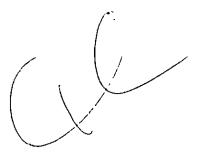




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12/28/23--01004--008 **25.00

2023 DEC 27 (3110: 5



COVER LETTER

TO: Registration Section Division of Corporations The enclosed Articles of Dissolution and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Person) For further information concerning this matter, please call: 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: Street Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liab UNIVERSAL LANDS LLC				
2. The Articles of Organizati	on were filed on 6/28/2023		_ and assigned	
document number L23000	317261	_		
Note: If the date inserted in	the dissolution if not effect we date cannot be prior to or more this block does not meet the active date on the Departmen	applicable statutory filing r	ocument is received for this	ng) il not be
4. A description of occurrence 605.0707, Florida Statutes.	ce that resulted in the limite (copy 605,0707 on back c	ed liability company's dis	solution pursuant to se	≵ tion
PURPOSE OF ENTITY'S EXISTENCE NULLIFIED.		,		Ĩ
4. A description of occurrence 605.0707, Florida Statutes, PURPOSE OF ENTITY'S EX			ī	÷27
				15.
5. If there are no members, e activities and affairs:		of the person appointed to MANAGER/MEMBER	o wind up the company	· s
	12515 ORANGE DR, ST	TE 810, DAVIE,FL 33330		_
6. Signature of an authorized above to wind up the compan	person or if there are no n y s activities and affairs:	nembers, the signature of	the person appointed a	nd liste
DocuSigned by: 9111E7D391F1409		ALEXANDER HACHE		
Signature		Printed Name		

FILING FEE: \$25.00