L23000322772

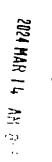
. (Requestor's Name)				
(Requestors Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
; !				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer				
Lumills				
<u> </u>				

Office Use Only



200425745152

08/14/24--01001--008 +-25.00



COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJECT: (Name of Limited Liability Company)					
	ROBERTA	ICNEALY "			
	MCNEALY INVES	TMEN 75			
(Firm/Company) 3617561EANDER 15 REACE					
RYWERAL HEIORIOG 33909					
	(City/Sta	ate and Zip Code)			
For further information concerning this matter, please call:					
	ROBERTALCHEALLY	561669357887			
	(Name of Person)	(Area Code & Daytime Telephone Number)			
Enclosed	l 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations 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 liab	ility company is	nts, LLC	
2. The Articles of Organizati	on were filed on 1000	UGry 12 23 Band assigned	ed
document number	vo322-772		
(effecti Note: If the date inserted in	the dissolution if not effective date cannot be prior to or more the this block does not meet the appetitive date on the Department of	an 90 days later than date document is recollicable statutory filing requirements,	eived for filing) this date will not be
4. A description of occurrence 605.0707, Florida Statutes	te that resulted in the limited l (copy 605.0707 on back cove	liability company's dissolution pur er letter).	suant to section
	NO COMPANY		
If there are no members, e activities and affairs:	nter the name and address of t _NomemBERS -	the person appointed to wind up th	e company's
	_ROBERTMENEAL	<u> </u>	
	- JGITOL EANOER TER	RACE	 -
	·	29lorida 33404_	
6. Signature of an authorized above to wind up the compar	person or if there are no men y's activities and affairs:	npers, the signature of the person a	ppointed and listed
Prhent 1	Maly =-	ROBERT-MCN	ealy
Signature	41.11777	Printed Name	V.III:C . / ·~

FILING FEE: \$25.00