L23000343Z11

(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:





100439192231





COVER LETTER

	sion of Corporations	
SUBJECT:	Fiorella Momentum Twin Creeks, LLC	
SOBJECT:	(Name of Limi	ited Liability Company)
The enclosed	Articles of Dissolution and fee(s) are submi	itted for filing.
	all correspondence concerning this matter to	
	•	-
	Bradley J. Sklar	
	(Na	me of Person)
	Dentons Sirote PC	
	(Fin	mvCompany)
	2311 Highland Avenue South	
		(Address)
	Birmingham, Alabama 35205	
	(City/St	ate and Zip Code)
For further inf	formation concerning this matter, please call	l: or email: janie.dillingham@dentons.com
	Janie Dillingham, Paralega!	(205) 930 - 5246
	(Name of Person)	at () (Area Code & Daytime Telephone Number)
Enclosed is a ch	teck for the following amount:	
≡ \$2 5 0	9 Filing Fee and Certificate of Dissolution	[4] \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)
<u>Maili</u>	ng Address:	Street Address:
Registration Section		Registration Section
	sion of Corporations Box 6327	Division of Corporations The Centre of Tallahassee
	shassee, 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
	Fiorella Momentum Twin Creeks, LLC
2.	The Articles of Organization were filed on 07/19/2023 and assigned
	document number 1.23000343211
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.
4,	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).
	Ceased to do business.
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. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:
	Lack Fiorella, III, Manager
7	Signature Printed Name

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

Jack Fiorella, III

Printed Name of the Person Eding

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: L23000343211 Date of dissolution was:			
Any persons with claims against the corporation should send written notice to Fiorella Momentum Twin Creeks, LLC			
Attention, Cassie McFadden, 3500 Blue Lake Drive, Ste 210, Vestavia, Alabama, 35245,			
Such claim should set forth the name of the claimant, the address and telephone number of the cinimant,			
the nature of the claim, including but not limited to, all facts supporting your claim and the date such claim arose.			
Mailing address where claims can be sent: (Ctaims cannot be sent to the Division of Curporations)			
Cassie McFadden			
3500 Blue Lake Drive, Suite 210			
Vestavia, Alabama 35243			
A claim against the above named limited liability company will be barred unless a proceeding to enforce the			

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00