

L23 000 395 934

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

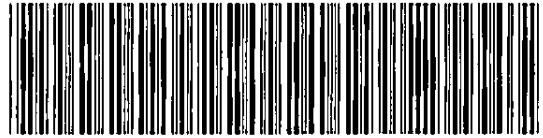
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800427020608

04/08/24--01024--016 \*\*25.00

FILED  
2021 APR -8 AM 9:39  
SECRETARY OF STATE  
TALLAHASSEE, FL

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Simply Cars LLC.  
(Name of Limited Liability Company)

FILED  
2024 APR -8 AM 9:10  
SECRETARY OF STATE  
TALLAHASSEE, FL

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rossy Santos.  
(Name of Person)

Simply Cars LLC  
(Firm/Company)

608 Savire Circle, Unit 203  
(Address)

Naples, FL 34104  
(City/State and Zip Code)

For further information concerning this matter, please call:

Rossy Santos at (239) 961-5565  
(Name of Person) (Area Code & Daytime Telephone Number)

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:**

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 liability company is

Simply Cais LLC

2. The Articles of Organization were filed on 8/23/2023 and assigned

document number L23000395934

3. The delayed effective date the dissolution if not effective on the date of filing: 4/3/2024  
(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).

Not enough income to continue supporting  
The 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:

Rossy Santos

608 Squire Circle, Unit 203

NAPLES, FL 34104

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:



Signature

Rossy Santos

Printed Name