

L23000469228

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

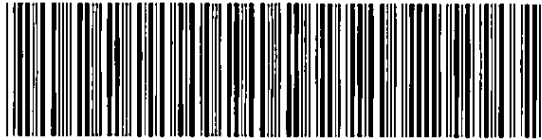
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:
J. HORNE
MAY 28 2024

Office Use Only



600429060776

05/06/24--01119--000 *\$25.00

FILED
2024 MAY -6 PM 12:19

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Shane Huey, LLC

(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

Michael S. Huey

(Name of Person)

(Firm/Company)

251 Narvarez Ave

(Address)

St. Augustine, Florida 32084

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael S. Huey

954

560-5245

at (_____) _____

(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**

FILED
2024 MAY -6 PM 12:19
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
Shane Huey, LLC

2. The Articles of Organization were filed on October 11, 2023 and assigned
document number L23000469228

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).
Did not launch anticipated business and, as such, do not need the LLC.

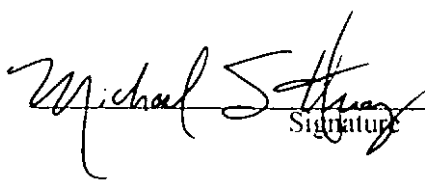
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Michael S. Huey

251 Narvarez Ave

St. Augustine, Florida 32084

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

MICHAEL S. HUEY
Printed Name

FILING FEE: \$25.00