## L23000474794

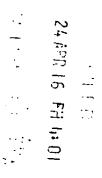
(Requestor's Name)			
(Address)			
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Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Rusiness Entity Name)			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
<del>,</del>			
Special Instructions to Filing Officer:			





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94 116,/24--01910--013 \*\*25,00



## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

I. The name of a limited liabil	• •	·
2. The Articles of Organizatio	on were filed on <u>6 cyaber 16, 2023</u> an	nd assigned
document number <u>2</u> 23	300047494	
Note: If the date inserted in	the dissolution if not effective on the date of filing:; e date cannot be prior to or more than 90 days later than date docu this block does not meet the applicable statutory filing requ etive date on the Department of State's records.	3-3/-24/ ment is received for filing) irements, this date will not be
	e that resulted in the limited liability company's dissol (copy 605.0707 on back cover letter).	
NO basiNes	55, Zero salas	
		24
5. If there are no members, enter activities and affairs:	nter the name and address of the person appointed to w	i i i i i i i i i i i i i i i i i i i
		<u> </u>
		102 1133 1133 1133 1133 1133 1133 1133 1
6. Signature of an authorized above to wind up the company	person or if there are no members, the signature of the y's activities and affairs:	person appointed and listed
at Ins	ART Jo	NEJ

FILING FEE: \$25.00

## **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT: HAZ CUSTOM	
(Name of Lin	nited Liability Company)
he enclosed Articles of Dissolution and fee(s) are subn	nitted for filing.
lease return all correspondence concerning this matter	to the following:
	ONES
4)	Name of Person)
(F	Firm/Company)
1940 TATNALL	5Q APT 307 (Address)
Very Beach	Fixed and Zip Code)
or further information concerning this matter, please ca	all:
ART TONES (Name of Person)	at ( 32/ ) 525-2789 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
nclosed is a cheek 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	Registration Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303