Note: Please properties page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : PAGIO'S & ASSOCIATES, LLC

Account Number : I20100000043 Phone : (305)397-8553 Fax Number : (305)397-8521

. ĭ : (305)397-8521

LLC DISSOLUTION OR WITHDRAWAL JOHN HASH FOOD LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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T. LEMIEUX MAR 2 2 2024

COVER LETTER

JOHN HASH FOOD LLC SUBJECT:				
(Name of Limite	d Liability Company)			
The enclosed Articles of Dissolution and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
RAINEESH L. DE MOURA ONOFRE				
(Name of Person)				
JOHN HASH FOOD LLC				
(Firm/Company)				
14040 BISCAYNE BLVD APT 802				
A)	ddress)			
NORTH MIAMI BEACH, FL 33181				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
RA ONOFRE	786 767-2278			
erson)	(Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:				
ate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)			
18	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	(Name of Limited and fee(s) are submitted and			

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability	company is				
		JOHN HASH FOOD LI	LC	·	
2. The Articles of Organization w	vere filed on	10/17/2023	and assigned		
document numberL2	3000476591				
. The delayed effective date the (effective date Note: If the date inserted in this listed as the document's effective	block does not me	et the applicable statutor	ian date document is received in y filing requirements, this di	for filing) ate will not be	
A description of occurrence the 605.0707, Florida Statutes, (cop	oy 605.0707 on b	limited liability compa ack cover letter).	ny's dissolution pursuant	to section	
. If there are no members, enter	the name and add	dress of the nerson annu	pinted to wind up the com	many's	
activities and affairs:		arous or the porson app	The contract of the contract o		
			(A)	2024 1	
_	· · · · · · · · · · · · · · · · · · ·			AR 21	
. Signature of an authorized pers bove to wind up the company's a	on or if there are ctivities and affa	no members, the signa irs:	1.3	6. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5.	
cesh Corran de Moura Onofre U4ar 21, 2024 12:06 EDT		RAJNE	BSH L. DE MOURA ONOF	TH W TH TRE	
Signature		Printed Name			

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

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:	JOHN HASH FOOD LLC	
Document number of Limit	ted Liability Company is:	L23000476591	
Date of dissolution was:	3/15/2024		
Description of information	that must be included in a v	vritten claim:	
DETAILED INFORMATION	N ABOUT THE FACTS THA	LEAD TO THE CLAIM. ALSO PRO	OVIDE CLEAR
CONTACT DETAILS AS N	ame, address, email as	ID PHONE NUMBER TO BE CONTA	ACTED.
			-
Mailing address where clair	ms can be sent: (Claims can	not be sent to the Division of Corpo	orations)
14040 BISCAYNE I	BLVD APT 802		
NORTH MIAMI BE	ACH, FL 33181		
-			
	,		
A claim against the above n claim is commenced within		any will be barred unless a proceed is notice.	ling to enforce the
RAJNEESH L. DE 1	MOURA ONOFRE	Raphaesh Lorran de Naura Onofre (Mar 11, 2024 13:0	6 EDT)

Signature of the Person Filing

Printed Name of the Person Filing