Edorida Department of State Bivision of Corporations Electronia Filing Cover Sheet

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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

LLC DISSOLUTION OR WITHDRAWAL AS FINANCIAL HOLDINGS, LLC

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

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Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJECT:					
	STANIJA DOBROJEVIC				
	(Name of Person)				
AS FINANCIAL HOLDINGS, LLC					
	(Firm/Company)				
	4925 COLLINS AVE, APT 12G				
	(Address)				
	MIAMI BEACH, FL 33141				
	(City/	State and Zip Code)			
For further information concerning this matter, please call:					
	STANIJA DOBROJEVIC	267 266 1436 at ()			
	(Name of Person)	at (
Enclose	ed is a check for the following amount:				
■ \$25.00 Filing Fee and Certificate of Dissolution		☐ \$55.00 Filing Pee, 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

A LIN	TITED LIABILITY COMPANY		_
1. The name of a limited liability comp	pany is AS FINANCIAL HOLDINGS, I	LIC P	KILED MIKES
2. The Articles of Organization were f	iled on 11/20/2023	and assigned	The second secon
document number 1.23000519969			65.6
3. The delayed effective date the disso (effective date cand Note: If the date inserted in this block listed as the document's effective date	lution if not effective on the date of filin not be prior to or more than 90 days later than da does not meet the applicable statutory filin on the Department of State's records.	ng: 07/08/2024	filing)
4. A description of occurrence that res 605.0707, Florida Statutes, (copy 60	ulted in the limited liability company's 5.0707 on back cover letter).	dissolution pursuant to	section
COMPANY OUT OF BUSINESS			
			-
5. If there are no members, enter the na	ame and address of the person appointed	d to wind up the compa	any's
activities and affairs:			
			·
			
6. Signature of an authorized person or above to wind up the company's activit	r if there are no members, the signature ties and affairs:	of the person appointed	d and listed
Stanga d2500 pvc (Avl 9, 2014 12:11 EUT)	STANIJA D	OBROJEVIC	
Signature	Print	ted 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.

AS FINANCIAL HO	
• • •	3000519969
Date of dissolution was:	3000519969
Description of information that must be included in a wr	itten claim:
DETAILED INFORMATION ABOUT THE FACTS THAT	LEAD TO THE CLAIM. ALSO PROVIDE CLEAR
CONTACT DETAILS AS NAME, ADDRESS, EMAIL AND	PHONE NUMBER TO BE CONTACTED.
Mailing address where claims can be sent: (Claims cannot 1100 SOUTH MIAMI AVE, UNIT 3406	ot be sent to the Division of Corporations)
MIAMI, FL 33130	
	<u></u>
A claim against the above named limited liability compa- claim is commenced within 4 years after the filing of this	ny will be barred unless a proceeding to enforce the notice.
STANIJA DOBROJEVIC	Stantia dispraiente (Jul 9, 2014 32:11 E01)
Printed Name of the Person Filing	Signature of the Person Filing

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