

L23000534773

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

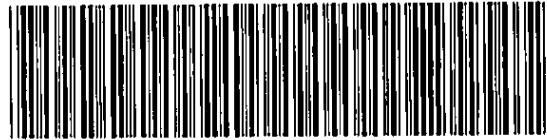
(Business Entity Name)

(Document Number)

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

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200427619222

LLC dissolution

FILED  
2024 MAY 17 PM 12:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
RECEIVED  
2024 MAY 17 AM 10:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

A. RAMSEY

MAY 20 2024

***Sunshine State Corporate Compliance Company***

*3458 Lakeshore Drive, Tallahassee, Florida 32312*

*(850) 656-4724*

DATE 05/17/2024

***\*\*WALK IN\*\****

ENTITY NAME Storm 23 LLC

DOCUMENT NUMBER \_\_\_\_\_

***\*\*PLEASE FILE THE ATTACHED AND RETURN\*\****

XXXXXXXXXX

*Plain Copy*

*Certified Copy*

*Certificate of Status*

***\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\****

*Certified Copy of Arts & Amendments*

*Certificate of Good Standing*

***\*\*APOSTILLE' / NOTARIAL CERTIFICATION\*\****

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL OWED \$25

ACCOUNT #: 120160000072

*S. R. FAD*

*Please call Tina at the above number for any issues or concerns. Thank you so much!*

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Storm 23 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:

Stacey Steadman

\_\_\_\_\_  
(Name of Person)

Holland & Knight LLP

\_\_\_\_\_  
(Firm/Company)

633 Chestnut Street, Suite 1400

\_\_\_\_\_  
(Address)

Chattanooga, TN 37450

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Stacey Steadman

423

682-6273

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 17 PM 12 38  
SECRETARY OF STATE  
TALLAHASSEE, FL 32399

1. The name of a limited liability company is

Storm 23 LLC

2. The Articles of Organization were filed on 12/01/2023 and assigned

document number L23000534773

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).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
The limited liability company's dissolution is a result of no business activity.

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

Ben Fox

16622 FLEUR DE LIS WAY

DELRAY BEACH, FL 33446

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:

DocuSigned by:

Ben Fox

067AD53D057F48C

Signature

Ben Fox

Printed Name

FILING FEE: \$25.00