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COVER LETTER

TO:

TO:	Registration Section Division of Corporations	
	Dissolution of Leej2024 LLC EIN# 93-4	4910123
SUBJE	CT:	
	(Name of Limi	ted Liability Company)
The encl	losed Articles of Dissolution and fee(s) are submi	itted for filing
		-
Please n	eturn all correspondence concerning this matter to	o the following:
	Jeannette Lee	
	(Na	me of Person)
	Tr:	10
	PO Box 491	m/Company)
	1 C BOX 451	
		(Address)
	McLean, VA 22101	
	(City/St	ate and Zip Code)
For furth	ner information concerning this matter, please call	l:
	Jeannette Lee	mobile# 571-421-9021
	OLCD	at ()(Area Code & Daytime Telephone Number)
	(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:	Street Address:
	Registration Section	Registration Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The name of a limited liability company is Leej2024 LLC		·
2. The Articles of Organization were filed on	2/2023	and assigned
document number		
The delayed effective date the dissolution if not (effective date cannot be prior to a Note: If the date inserted in this block does not me listed as the document's effective date on the Depart	or more than 90 days later than date d et the applicable statutory filing re	ocument is received for filing)
. A description of occurrence that resulted in the 605,0707, Florida Statutes, (copy 605,0707 on b There has been no business activity of any type to date and no acti	ack cover letter).	solution pursuant to sectio
There has been no business activity of any type to date and no activity	rity since the LLC was first established.	2024 KI
There has been no business activity of any type to date and no activ	ity since the LLC was first established.)V 25
. If there are no members, enter the name and add	dress of the person appointed to	SECTOR SECTION
activities and affairs:		
<u>Jeannette</u>	Le Po Box 491	McLeanVA
		
Signature of an authorized person or if there are bove to wind up the company's activities and affa	no members, the signature of	the person appointed and I
All	Jeannette Lee, Sole member o	
Signature	Printed	Name

FILING FEE: \$25.00