

23000557843

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

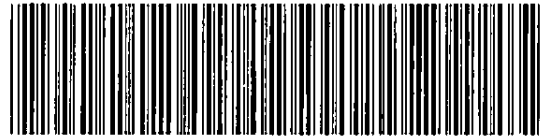
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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11/19/24 -01033--010 **25.00



STATE OF FLORIDA
TALLAHASSEE, FL

2024 NOV 19 PM 1:55

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MaintStreet Capital 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:

Sal Salvatierra

(Name of Person)

Maint Street Capital LLC

(Firm/Company)

12234 Sw Sea Springs Rd

(Address)

Port Saint Lucie, FL 34987

(City/State and Zip Code)

For further information concerning this matter, please call:

Sal Salvatierra

786

290-9911

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

OFFICE OF THE
CLERK OF THE
TALLAHASSEE, FL

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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: Maint Street Capital LLC

Document number of Limited Liability Company is: 123000557843

Date of dissolution was: 11/15/2024

Description of information that must be included in a written claim:

Closing the business

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

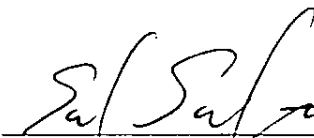
Sal Salvatierra

12234 SW Sea Springs Rd. Port Saint Lucie FL 34987

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Sal Salvatierra

Printed Name of the Person Filing



Signature of the Person Filing



STATE OF FLORIDA
DIVISION OF CORPORATIONS

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1. The name of a limited liability company is

Maint Street Capital LLC

2. The Articles of Organization were filed on 12/19/2023 and assigned

document number 1.23000557843

3. The delayed effective date the dissolution if not effective on the date of filing: 11/15/2024
(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).

closing the business

closing the business

closing the business

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

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:


Signature

Sal Salvatierra
Printed Name

FILING FEE: \$25.00

FILED
2024 NOV 19 PM 1:55
CLERK OF STATE
TALLAHASSEE, FL