## L24000043289

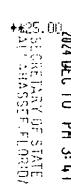
(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
, ,			
(Document Number)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
<u> </u>			

Office Use Only



800440469048

12/10/24--01004--022



## **COVER LETTER**

TO: Registration Section Division of Corporations	•			
SUBJECT: Seven fotures LL	$\mathcal{C}$			
	Liability Company)			
The enclosed Articles of Dissolution and fee(s) are submitted	for filing.			
Please return all correspondence concerning this matter to th	e following:			
IRISHA Bogg	Ź			
1 Seren fotores	of Person)  Company)			
1118 Hornbu	Company) TY A,			
1.0	1dress) Fl 34219			
(City/State	and Zip Code)			
For further information concerning this matter, please call:				
TRISHA Boggs	at (248) 156-480	<u></u>		
(Name of Person)	(Area Code & Daytime Telephone Numb	er)		
Enclosed is 4 check for the following amount:				
13 \$25.00 Filing Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed	)	2024	
Mailing Address: Pagistration Section	Street Address:	RETARY MHASSE	0EC 10	7
Registration Section Division of Corporations	Registration Section Division of Corporations	High High	Pg.	IT
P.O. Box 6327	The Centre of Tallahassee	STAT LORI	ယ့်	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	≃ =-	_	

Tallahassee, FL 32303

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is  SEVEN FINTURES LLC	
2.	The Articles of Organization were filed on $\frac{1/23/24}{}$ and assigned	
	document number $\frac{L24000043289}{40000043289}$	
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).  We were made to find sufficient for our	
	online business and decided to give up on	
	the business and Close the LLC	
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:	
	M8 Thornbury DI.	
	Parrish, F1 34219	
	A SECOND	
6. al	Signature of an authorized person or if there are no members, the signature of the person appointed and listed bove to wind up the company's activities and affairs:	
	Justin Boggs 1 Risha Boggs 3	ED
	Signature Printed Name $\bigcirc_{C_1}$	

FILING FEE: \$25.00