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| (Business Entity Name) | | | | | |
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| Certified Copies Certificates of Status | | | | | |
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| Special Instructions to Filing Officer: | | | | | |
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Office Use Only



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SECRETARY OF STATE

COVER LETTER.

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

| Division of Corporations | | | | | | |
|---------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|--|--|--|--|
| SUBJECT: | BJECT: VALERIE LYNN LLC < not the same as INACTIVE Valerie Lynn, LLC (Name of Limited Liability Company) | | | | | |
| | Please dissolve VALERIE LYNN LLC (the one without the comma) | | | | | |
| The enclosed Articles of Dissolution and fee(s) are submitted for filing. | | | | | | |
| Please return all correspondence concerning this matter to the following: | | | | | | |
| | VALERIE LYNN | | | | | |
| (Name of Person) | | | | | | |
| (Firm/Company) | | | | | | |
| | 1921 NE 28 STREET | | | | | |
| (Address) | | | | | | |
| LIGHTHOUSE POINT, FL 33064 | | | | | | |
| (City/State and Zip Code) | | | | | | |
| For further info | rmation concerning this matter, please call: | | | | | |
| Vale | rie Lynn | at (954)798-0848 | | | | |
| | (Name of Person) | (Area Code & Daytime Telephone Number) | | | | |
| Enclosed is a che | ck for the following amount: | | | | | |
| XI \$25.00 Filing Fee and Certificate of Dissolution | | ☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed) | | | | |
| | g Address: tration Section | Street Address: Registration Section | | | | |
| _ | ion of Corporations | Division of Corporations | | | | |

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. | The name of a limited liability company is VALERIE LYNN LLC | | | | |
|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|----------------------------|------------|--|
| 2. | The Articles of Organization were filed on _ | FEB 12 2024 | and assigned | | |
| | document number <u>L24000075036</u> | | | | |
| 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 605.0707, Florida Statutes, (copy 605.0707 c | the limited liability company on back cover letter). | s dissolution pursuament | 24.BCT 29 | |
| | As the Company is not doing business, | it was decided to dissolve t | he LLC. SEE STATE | AH 8: 54 | |
| 5. | If there are no members, enter the name and activities and affairs: | d address of the person appoin | ted to wind up the compar | ny's | |
| | Valerie J. L | ynn | | | |
| | 1921 NE 28 | Street, Lighthouse Point, I | FL 33064 | <u> </u> | |
| 6. at | Signature of an authorized person or if there bove to wind up the company's activities and | e are no members, the signatur affairs: | re of the person appointed | and listed | |
| _ | Volum of the | Valerie J. Lym | | | |
| | / Signature | ML1 | nted Name | | |

FILING FEE: \$25.00