L24000119513

(Requestor's Name)				
(Address)				
(Address)				
(1.12510535)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
(2333.72 3. 3. 3. 3.)				
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SELVEN TOTAL

28 LN 9: 32

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJ	KAREN MCALIECE			
0020	(Name of Limited	Liability Company)		
	closed Articles of Dissolution and fee(s) are submitte	-		
	KAREN MCALIECE			
	(Name	of Person)		
	Karen McAliece LLC			
(Firm/Company) 1319 SILVERSTONE AVE				
	(Address)			
	ORLANDO,FLORIDA 32806		200	
	(City/State	and Zip Code)	- FG	
For fu	ther information concerning this matter, please call:		2021 OCT 28 SECKETALL	
	Karen McAliece	407 714-5029		
	(Name of Person)	at () (Area Code & Daytime Teleph	none Number)	
Enclos	ed is a check for the following amount:		•••	
	\$25.00 Filing Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Di Certified Copy (additional copy i		
Mailing Address:		Street Address: Registration Section		
Registration Section Division of Corporations		Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee	•••	
		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

. • •

I. The name of a limited liability company is Karen McAliece LLC	
. The Articles of Organization were filed on $\frac{M}{N}$	March 8,2024 and assigned
document number L24000119513	
(Checulae date cannot be pitti	not effective on the date of filing: October 23,2024 to or more than 90 days later than date document is received for filing) meet the applicable statutory filing requirements, this date will not be epartment of State's records.
A description of occurrence that resulted in the 605.0707, Florida Statutes, (copy 605.0707 of	the limited liability company's dissolution pursuant to section in back cover letter).
No longer in business.	
No longer in business.	
No longer in business.	TANK OF ON
	1. 28
If there are no members, enter the name and	address of the person appointed to wind up the company is
activities and affairs:	
Signature of an authorized person or if there bove to wind up the company's activities and a	are no members, the signature of the person appointed and list affairs:
aron Mª aluce	Karen McAliece
Signature	Printed Name

FILING FEE: \$25.00