24000/24/6/

(Requestor's Name)							
(Address)							
(Address)							
(,							
0.70.							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Dusiness Entry Name)							
(Document Number)							
Certified Copies Certificates of Status							
C : 11							
Special Instructions to Filing Officer:							

Office Use Only



700432336787

07/81/24--01001--018 **25.00

2011 201 36 NH 8: 41 2024 JUL 31 AM 11: 37 RECEIVED

Registration Section

TO:

COVER LETTER

Div	ision of Corporations		
SUBJECT:	PROSPORTS HOLDINGS LLC		
SOBJECT.	Name of Lir	nited Liability Compa	any
Dear Sir or N	Madam:		
The enclosed	l Withdrawal Statement and fee(s) are s	ubmitted for filing.	
Please return	all correspondence concerning this man	iter to the following:	
	Name of Person		
Registered 2	Agent Solutions, Inc.		
	Firm/Company	-	
5301 South	vest Parkway Suite 400		
	Address	<u> </u>	
Austin, Tex	as 78735		
	City/State and Zip Code	;	
E-1	nail address: (to be used for future annu	al report notification)	
For further in	nformation concerning this matter, pleas	se call:	
		at ()	
	Name of Person	Area Code	Daytime Telephone Number

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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liabi								
2.	The Articles of Organization	on were filed on _03/19/20)24	and assigned					
	document number L240001	27161	<u> </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 605.0707, Florida Statutes,	e that resulted in the limi (copy 605.0707 on back	ted liability company's disso	olution pursua	nt to s	ection			
			gage in any business and does r	not now intend	io do se).			
5.	If there are no members, en		s of the person appointed to	wind up the co	ວກຖືກີລູ້ກ	 y`s			
	activities and affairs:	Wayne Souza		<u> </u>	空	•			
		7232 Magpie Lane			8				
		Falls Church, Va 22043		Service Environmental Service	ÁM 8	÷ ;			
				FL FL	+				
6, ab	Signature of an authorized ove to wind up the company	person or if there are no v's activities and affairs:	members, the signature of th	ne person appo	ointed	and liste			
	DocuSigned by:								
	Wayne Sour	a	WAYNE SOUZA						
	F*SFERSTEGYEN		Printed N	Jame					

FILING FEE: \$25.00