

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Moxie Title LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fees(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Giovanni Fernandez

(Name of Person)

Moxie Title LLC

(Firm/Company)

210 N Bumby Ave Ste B

(Address)

Orlando, FL 32803

(City/State and Zip Code)

For further information concerning this matter, please call:

Angeline Feliciano

(Name of Person)

201

283-2864

at (

_____) _____
(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

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Moxie Title LLC

2. The Articles of Organization were filed on 05/14/2024 and assigned

document number 1.240002245-48

3. The delayed effective date the dissolution if not effective on the date of filing: 08/31/2025
(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).

Moxie Title LLC will no longer be used as it was intended.

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

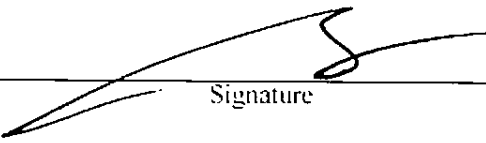
activities and affairs:

Giovanni Fernandez

210 N Bumby Ave Ste B

Orlando, FL 32803

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

Giovanni Fernandez
Printed Name

FILING FEE: \$25.00

2025 AUG 18 PM 12:25
FILED

Moxie Home Builders
210 N Bumby Ave Ste B
Orlando, FL 32803

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To whom this may concern:

Contact Persons,
Angeline Feliciano 201-283-2864
Giovanni Fernandez 702-296-6945