

11/12/24, 12:32 PM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : TRAUB LIEBERMAN STRAUS & SHREWSBERRY, LLP
Account Number : I20160000031
Phone : (561)848-8300
Fax Number : (561)848-8301

LLC DISSOLUTION OR WITHDRAWAL
RRS BALLERS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

RECEIVED

2024 NOV 18 PM 4:32

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DIVISION OF CORPORATIONS
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November 13, 2024

FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
NOV 13 2024

BY:

RRS BALLERS, LLC
16471 75TH AVENUE N
PALM BEACH GARDENS, FL 33309

SUBJECT: RRS BALLERS, LLC
REF: L24000291220

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The Notice of Dissolution must contain a description of information that should be included in a written claim. The description may include but not limited to who is filing the claim, the amount of the claim and a reason the claim is being filed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

FAX Aud. #: E24000375769
Letter Number: 624A00024802

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RRS Baller LLC
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

Scott Pagano
(Name of Person)
RRS BALLERS LLC
(Firm/Company)
16471 75th AVE N
(Address)
Palm beach Gardens FL 33418
(City/State and Zip Code)

For further information concerning this matter, please call:

Scott PAGANO at 917, 363-2558
(Name of Person) (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 RRS Ballers LLC
2. The Articles of Organization were filed on June 27 2024 and assigned
document number 624000291220
3. The delayed effective date the dissolution if not effective on the date of filing: 11/11/24
(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).

the consent of ALL Members to cease operations

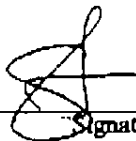
5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs:

SCOTT PAGANO

16471 75th AVE N

PALE BEACH GARDENS FL 33418

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

SCOTT PAGANO

Printed Name

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: RRS BALLERS LLC

Document number of Limited Liability Company is: 624000291220

Date of dissolution was: 11/11/24

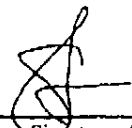
Description of information that must be included in a written claim:

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

16471 75th AVE N
Palm beach garden FL 33418

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Scott Pargano
Printed Name of the Person Filing


Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00