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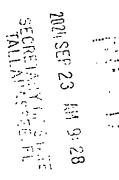
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer;			

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09/23/24--01031--003 **25.00



COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJI	JAJ BRICKELL, LLC		_	
50200	(Name of Limited Liability Company)			
		1.5		
	closed Articles of Dissolution and fee(s) are submitted			
Please	return all correspondence concerning this matter to th	e following:		
	PAUL ROSENBERG			
	(Name	of Person)	٠.	
		17. 17.	37.	
	(Firm/	Company)	7074 SEP 23	
	2501 HOLLYWOOD BLVD., SUITE 110	7. F. 200	23	
	(Address)		3	
	HOLLYWOOD, FL 33020	no.	Ģ	
	(City/State	and Zip Code)	28	
For fu	ther information concerning this matter, please call:			
	PAUL ROSENBERG	954 931-9000		
	(Name of Person)	at ()	_	
Enclose	d is a check for the following amount:			
1	■ \$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 JAJ BRICKELL, LLC
2.	The Articles of Organization were filed on 7/29/2024 and assigned
	document number <u>L24000328931</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 the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
	に 20 20 20 20 20 20 20 20 20 20 20 20 20 2
	The company no longer has a need to, nor does it, conduct any buisness
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed to wind up the company's activities and affairs:
	Paul Rosenberg
	Signature Printed Name FILING FEE: \$25.00