## L24000340642

|                            | Danisa da da Alama      |           |
|----------------------------|-------------------------|-----------|
| (1                         | Requestor's Name)       |           |
|                            |                         |           |
| ( <i>F</i>                 | Address)                |           |
|                            |                         |           |
|                            | Address)                |           |
|                            |                         |           |
|                            | City/State/Zip/Phone #) |           |
| ,,                         | ongrotatore.pri none #; |           |
| PICK-UP                    | WAIT                    | MAIL      |
|                            |                         |           |
| (8                         | Business Entity Name)   |           |
|                            |                         |           |
| <del></del>                | Document Number)        |           |
| (-                         | occurrent Homoery       |           |
|                            |                         |           |
| Certified Copies           | Certificates o          | of Status |
|                            |                         |           |
| Special Instructions to Fi | iling Officer:          |           |
| ,                          | •                       |           |
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LLC dessolution

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A. RAMSEY SEP 4 2024

FILED
2024 SEP -3 AM 8: 4

CSC - Tallahassee
CSC 1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations

From: Amanda Miller

Ext: x62969 Date: 09/03/24 Order #: 1607665-1 Re: L Team, LLC

Processing Method: Routine

## TO WHOM IT MAY CONCERN:

## Enclosed please find:

Application for Dissolution/Cancellation/Termination
Amount to be deducted from our State Account: \$25.00 - FL State Account Number: |2000000195

Please take the following action:

File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

us de man

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| The name of a limited liability company is     L Team, LLC                    |   | 2024 SEP -8 AM 8: 41  |  |
|---|---|---|--|
|   |   | SECRETARY OF STATE SALE AHASSEE FLORIDA   |  |
| 2. The Articles of Organiza   | tion were filed on August 8, 2024   |   |  |
| document number L240  | 000340642   |   |  |
| (effect Note: If the date inserted  | te the dissolution if not effective on the da<br>tive date cannot be prior to or more than 90 days la<br>in this block does not meet the applicable state<br>fective date on the Department of State's reco | ter than date document is received for filing) utory filing requirements, this date will not be |  |
| 4. A description of occurrer 605.0707, Florida Statute                        | nce that resulted in the limited liability cors. (copy 605.0707 on back cover letter).  | npany's dissolution pursuant to section   |  |
| No longer receiving the 2025  | 5 consulting contract the entity was created for  | ·   |  |
|   |   |   |  |
|   |   |   |  |
|   |   |   |  |
| 5. If there are no members, activities and affairs:                           | enter the name and address of the person a  | appointed to wind up the company's  |  |
|   | 9066 Pintura Way  |   |  |
|   | Boca Raton, FL 33496  |   |  |
|   |   |   |  |
| <ol> <li>Signature of an authorize<br/>above to wind up the compa-</li> </ol> | d person or if there are no members, the s<br>ny's activities and affairs:  | ignature of the person appointed and listed   |  |
| DocuSigned by:  | Noah Heller   | <del>-</del>  |  |
| BOF6B686FCB64B1gnature  |   | Printed Name  |  |

**FILING FEE: \$25.00**