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, (R	equestor's Name)	
(A ₁	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #	#)
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PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name	<u> </u>
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Certified Copies	Certificates o	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO: Registration Section

Tallahassee, FL 32314

Division of Corporations	
SUBJECT: Bellicus Renta	els UC-
(Name of Limited i	Liability Company)
The enclosed Articles of Dissolution and fee(s) are submitted	for filing.
ru u u u u u u u u u u u u u u u u u u	fallowing
Please return all correspondence concerning this matter to the	following.
1 —	
Antonio Tr	ances.
(Name o	of Person)
0	
Bellieus Rent	als UC-
(Firm/C	ompany)
// 4 8 3 NU 43	rd ct
1/980 14W 95	dressi
Coral Springs,	TL 33045
UCity/State a	nd Zip Code)
For further information concerning this matter, please call:	
Λ , T	
Antonio Trancis.	at (954) Lo 47 - 7825 (Area Code & Daytime Telephone Number)
(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:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The name of a limited liab	cus Rentals U.C.
The Articles of Organizati	ion were filed on August 16,2024 and assigned
document number <u>L</u> 2	4000359874
Note: If the date inserted in	e the dissolution if not effective on the date of filing: Aug 30, 2014, we date cannot be prior to or more than 90 days later than date document is received for filing) in this block does not meet the applicable statutory filing requirements, this date will not be ective date on the Department of State's records.
605.0707. Florida Statutes	ce that resulted in the limited liability company's dissolution pursuant to section (copy 605.0707 on back cover letter). Circumstances.
If there are no members, a	enter the name and address of the person appointed to wind up the company's
activities and affairs:	Antonio Francis.
	11488 NW 43rd St
	Coral Springs, FL 330205

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: