

L24000459 355

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : CAPITOL SERVICES, INC.
Account Number : I20160000017
Phone : (855)498-5500
Fax Number : (800)432-3622

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DIVISION OF CORPORATIONS
STATE OF FLORIDA

**LLC DISSOLUTION OR WITHDRAWAL
ADMIRALS 604, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

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Corporate Filing Menu

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A. RAMSEY

NOV 15 2024

COVER LETTER

H24000378457

TO: Registration Section
Division of Corporations

SUBJECT: Admirals 604, 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:

Colleen Monaghan

(Name of Person)

Royer Cooper Cohen Braunfeld LLC

(Firm/Company)

101 West Elm Street, Suite 400

(Address)

Conshohocken, PA 19428

(City/State and Zip Code)

For further information concerning this matter, please call:

Colleen Monaghan

(Name of Person)

484

362-2623

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

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

H24000378457

1. The name of a limited liability company is
Admirals 604, LLC
2. The Articles of Organization were filed on 10/30/2024 and assigned
document number L24000459355
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).
FILED IN ERROR

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: Colleen Monaghan - Royer Cooper Cohen Braunfeld LLC

101 West Elm Street, Suite 400

Conshohocken, PA 19428

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:

/s/ Colleen Monaghan

Signature

Colleen Monaghan

Printed Name

FILING FEE: \$25.00

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