

#L04000007738

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

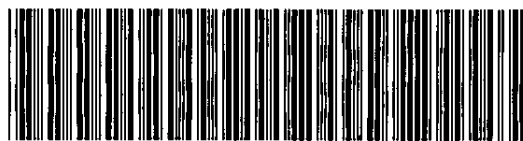
(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2014 JUL 16 AM 9:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
JUL 17 2014



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 18, 2014

JAMES P LAZAZERRA
89 SOUTH ATLANTIC AVE, APT. 1503
ORMOND BEACH, FL 32176

SUBJECT: LAZ ENTERPRISES, LLC
Ref. Number: L04000007738

We have received your document for LAZ ENTERPRISES, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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

Letter Number: 614A00013253

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DISSOLUTION OF LAZ ENTERPRISES, 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:

James P. LAZAZEREA
(Name of Person)

(Firm/Company)

89 S. ATLANTIC AVE APT 1503
(Address)

ORMOND BEACH FL 32176
(City/State and Zip Code)

For further information concerning this matter, please call:

James LAZAZEREA at 321 431 0046
(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)

*Previously paid
35*

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

2014 JUL 16 AM 9:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

L A 2 enterprises LLC

2. The Articles of Organization were filed on 1/28/04 and assigned

document number L04006067738

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)

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).

Assets of Company were sold and has
ceased conducting business

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. 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]
Signature

James P. Lazarene
Printed Name
Mgr. Member

FILING FEE: \$25.00