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(Address)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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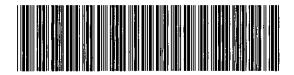
Special Instructions to Filing Officer:

L. SELLERS

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EXAMINER

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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJI	Charming Spaces, LLC		
	(Name of I	Limited Liability Company)	
The en	closed Articles of Dissolution and fee(s) are sa	abmitted for filing.	
Please	return all correspondence concerning this matt	er to the following:	
	Nicole A. Moffa-Macri		
		(Name of Person)	
Charming Spaces, LLC			
(Firm/Company)			
10123 Sedgebrook Dr.			
(Address)			
Riverview, FL 33569			
	(Ci	ty/State and Zip Code)	
For fur	ther information concerning this matter, please	e call:	
Nicole Moffa-Macri		at (813) 785-7084	
	(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclose	ed is a check for the following amount:		
\$25.0	30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
	MAILING ADDRESS:	STREET/COURIER ADDRESS:	
	Registration Section	Registration Section	
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
	Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

09 JUN 19 PM 4: 47

SECRETARY OF STATE TALLAHASSEE FLORIDA
and assigned document number
08
d liability company's dissolution pursuant to section er letter). nent, upon the written consent of all of the members of the limited liability company
hited liability company have been paid or discharged. bts, obligations and liabilities pursuant to s. 608.4421.
ed among its members in accordance with their respective
ny in any court.
nembership interests necessary to approve the dissolution:
Printed Name
Nicole A. Moffa-Macri

FILING FEE: \$25.00