

L05000012559

(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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2015 JAN 12 PM 4:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 22 2015
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SAVE ROOM FOR DESSERT, 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:

Jason Weiss

(Name of Person)

Weiss Law Group, P.A.

(Firm/Company)

5531 N. University Drive, Suite 103

(Address)

Coral Springs, FL 33067

(City/State and Zip Code)

For further information concerning this matter, please call:

Jason Weiss

(Name of Person)

954

at (

573-2800

(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/COURIER ADDRESS:

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

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

1. The name of a limited liability company is
SAVE ROOM FOR DESSERT, LLC
2. The Articles of Organization were filed on 02/07/2005 and assigned
document number L05000012559
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).
A consent of all of the Members.

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: Tova Weiss
5531 N. University Drive, Suite 103
Coral Springs, FL 33067

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:

Tova Weiss
Signature

Tova Weiss
Printed Name

FILING FEE: \$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: SAVE ROOM FOR DESSERT, LLC

Document number of Limited Liability Company is: L05000012559

Date of dissolution was: January 7, 2015

Description of information that must be included in a written claim:

2015 JAN 12 PM 4:57
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TALLAHASSEE, FLORIDA

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Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Weiss Law Group, P.A.

5531 N. University Drive

Suite 103

Coral Springs, FL 33067

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Tova Weiss

Printed Name of the Person Filing

Tova Weiss

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00