

| (Re | equestor's Name) | | | |
|--------------------------|------------------|-------------|--|--|
| (Ad | ldress) | ····- | | |
| (Ad | ldress) | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificate | s of Status | | |
| Special Instructions to | Filing Officer: | | | |
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Office Use Only

G. MCLEOD

APR 26 2010

EXAMINER



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DIVISION OF CORPORATIONS

COVER LETTER

| TO: Registration Section Division of Corporations | | | | | |
|--|--|--|--|--|--|
| SUBJECT: Alluring Affairs, 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: | | | | | |
| Mariana (O) min | | | | | |
| Melissa Parris (Name of Person) | | | | | |
| (Name of Person) | | | | | |
| (Firm/Company) | | | | | |
| 11170 NW 100 DY | | | | | |
| (Address) | | | | | |
| Coral Springs, FL 33071 | | | | | |
| (City/State and Zip Code) | | | | | |
| For further information concerning this matter, please call: | | | | | |
| ~ | | | | | |
| Melissa Parris #954, 650-8729 | | | | | |
| (Name of Person) (Area Code & Daytime Telephone Number) | | | | | |
| Enclosed is a check for the following amount: | | | | | |
| \$25.00 Filing Fee 30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & 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 Alluring Affairs, LLC | · · | • | |
|--|--|-----------|--|--|
| | 2. The Articles of Organization were filed on 1/2/2005 and assigned document L05000111999 | num | ber | |
| | 3. The date the dissolution was approved: 420 2010 | | | |
| 4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter). LLC IS NO LONGEY ENGAGING IN BUSINESS ACTIV | | | | |
| | There is no need for this LLC amall | | | |
| (| members of LLC agree to dissolve LLC. | | | |
| | 5. CHECK ONE: | | | |
| | All debts, obligations and liabilities of the limited liability company have been paid or discharged on the liability company have been paid or discharged on the liability of the liability company have been paid or discharged on the liability of the liability of the liability of the liability of the liability | _ | | |
| | All remaining property and assets have been distributed among its members in accordance with their re- rights and interests. | | ive | |
| | 7. CHECK ONE: | | | |
| | There are no suits pending against the company in any court. OR- Adequate provision has been made for the satisfaction of any judgment, order or decree which entered against it in any pending suit. | may | be | |
| S | ignatures of the members having the same percentage of membership interests necessary to approve the dis- | soluti | on: | |
| | Signature Printed Name | | | |
| Ī | Melissa Panis Melissa Parri | <u>S</u> | | |
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| _ | | APR | Sign | |
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| _ | | <u>⊋</u> | Ber S | |
| | FILING FEE: \$25.00 | ?: યુક | | |