

600166346306

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

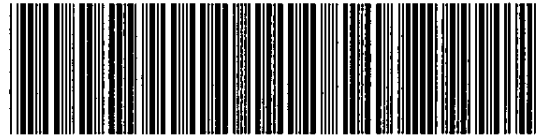
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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600166346306

01/19/10--01051--014 **35.00

FILED
10 MAY 18 PM 3:57
CLERK OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

MAY 19 2010

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 20, 2010

JEFFREY A. MASON
9637 PORTO FINO DRIVE
ORLANDO, FL 32832

SUBJECT: MASON FAMILY HAIR, LLC
Ref. Number: L06000039239

We have received your document for MASON FAMILY HAIR, 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) 245-6984.

Deborah Bruce
Regulatory Specialist II

Letter Number: 810A00001538

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10 MAY 18 PM 3:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Mason Family Hair, 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:

Jeffrey A. Mason
(Name of Person)

(Firm/Company)

9605 Cypress Pine St.
(Address)

Orlando, FL 32827
(City/State and Zip Code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Jeff Mason at (407) 489-1303
(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

☐ \$55.00 Filing Fee &
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

Mason Family Hair, LLC

2. The Articles of Organization were filed on 4/14/2006 and assigned document number LO6000039239

3. The date the dissolution was approved: 12/31/2009

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).

Closed business

5. CHECK ONE:

- ☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.
-OR-
☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.441, Florida Statutes.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

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 may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name

Jeffrey A. Mason
Diana L. Mason
Marcia A. Mason
Albert J. Mason

Jeffrey A. Mason
Diana L. Mason
Marcia A. Mason
Albert J. Mason

FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA