

L06 00006259

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

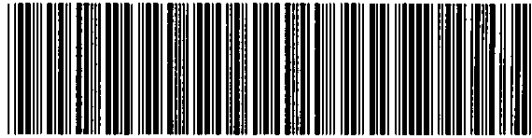
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400157246574

06/24/09--01017--009 **30.00

FILED
09 JUN 24 PM 3:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

JUN 25 2009

EXAMINER

COVER LETTER

***TO:** Registration Section
Division of Corporations

SUBJECT: Expressions From the Heart Florist & Gift Shop, 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:

Johanna White

(Name of Person)

Expressions From the Heart Florist & Gift Shop, LLC

(Firm/Company)

200-B Reid Avenue

(Address)

Port St. Joe, Florida 32456

(City/State and Zip Code)

For further information concerning this matter, please call:

Johanna White

(Name of Person)

at (850) 227.6268

(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
Expressions From the Heart Florist & Gifts Shop LLC

2. The Articles of Organization were filed on 06/15/06 and assigned document number
L06000061259

3. The date the dissolution was approved: 06/22/09

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).

Main designer is ill and can no longer work. The economy as is and business being slow the owner could not afford to hirer someone else.

FILED
JUN 24 PM 3:21
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF DADE
FLORIDA

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. 608.4421.

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

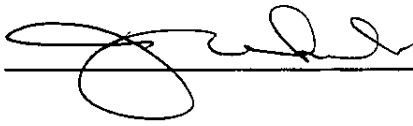
7. CHECK ONE:

- 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



Johanna White, Managing Member

