

L070000041127

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

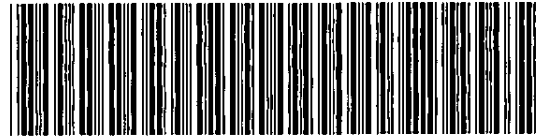
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 26 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AESTHETIC WOMEN'S INSTITUTE 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:

PATRICK DISALVO

(Name of Person)

DISALVO & ASSOCIATES PLLC

(Firm/Company)

1760 N JOG RD SUITE 150

(Address)

WEST PALM BEACH FL 33411

(City/State and Zip Code)

For further information concerning this matter, please call:

PATRICK DISALVO

(Name of Person)

at (561) 659-1177

(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
AESTHETIC WOMEN'S INSTITUTE LLC
2. The Articles of Organization were filed on APRIL 17, 2007 and assigned
document number L07000041127
3. The delayed effective date the dissolution if not effective on the date of filing: APRIL 21, 2016
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be
listed as the document's effective date on the Department of State's records.
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).
BUSINESS OPERATIONS CEASED AND COMPANY HAS NO ASSETS
5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs:
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:

Signature

STEVEN R POLIAKOFF

Printed Name _____

FILING FEE: \$25.00

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CLERK OF STATE
TALLAHASSEE, FLORIDA