

207000069461

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

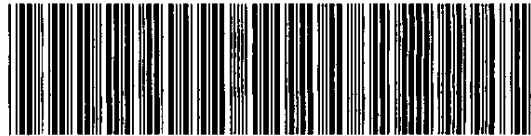
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700158349337

07/14/09--01043--005 **25.00

FILED
09 AUG 31 AM 9:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

SEP 1 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LIPZ, 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:

LISA D. SPINAZOLA
(Name of Person)
LIPZ, LLC
(Firm/Company)
11400 4TH ST. N # 109 (NEW APT. #)
(Address)
ST. PETERSBURG FL 33716
(City/State and Zip Code)

For further information concerning this matter, please call:

LISA SPINAZOLA at (813) 943-3471
(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

09 AUG 31 AM 9:42
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 15, 2009

LISA D. SPINAZOLA
11400 4TH ST. N #109
ST. PETERSBURG, FL 33716

SUBJECT: LIPZ, LLC
Ref. Number: L07000069461

We have received your document for LIPZ, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, must be contained in the document.

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: 209A00024251

FILED
09 AUG 31 AM 9:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

1. The name of a limited liability company is

LIPZ, LLC

2. The Articles of Organization were filed on 7/2/2007 and assigned document number

L 07000069461

3. The date the dissolution was approved: 3/23/2009

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).

I NEVER SOLD 1 ITEM. THE ECONOMY & MY GOING
BACK TO SCHOOL MADE IT IMPOSSIBLE FOR ME TO
SPEND TIME CREATING THINGS TO SELL IN A MARKET THAT
WAS TIGHTENING.

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.

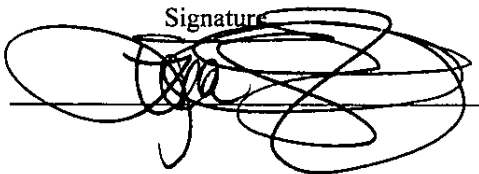
6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

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

LISA P. SPINAZOLA

FILED
09 AUG 31 AM 9:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA