

LO7000110427

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

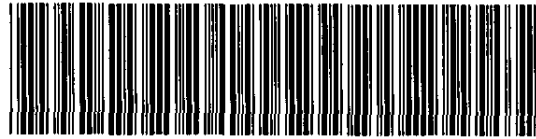
LO7-110427

(Document Number)

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08 SEP 15 PM 1:49
SECRETARY OF STATE
TALLAHASSEE FLORIDA

N. Galtman SEP 15 2008

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Eilte Nails, 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:

BANH VAN NGUYEN
(Name of Person)
Eilte NAILS LLC
(Firm/Company)
5475 W. Irlo Bonson Mem Hwy
(Address)
Kissimmee, FL 34746
(City/State and Zip Code)

For further information concerning this matter, please call:

Katchyn Nguyen at (407) 390-9945
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> 30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 4, 2008

BANH VAN NGUYEN
5475 W. IRLO BRONSON MEMORIAL HIGHWAY
KISSIMMEE, FL 34746

SUBJECT: ELITE NAILS KISSIMMEE LLC
Ref. Number: L07000110427

We have received your document for ELITE NAILS KISSIMMEE LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

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.

The document must contain the effective date of the limited liability company's dissolution.

The Division of Corporation will not grant a refund for a document that is already filed.

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) 245-6067.

Neysa Culligan
Document Specialist

Letter Number: 208A00048726

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

09 SEP 15 PM 1:49

SECRETARY OF STATE
TALLAHASSEE FLORIDA

1. The name of a limited liability company is

Eitle Nails Kissimmee LLC

2. The Articles of Organization were filed on 10/31/07 and assigned document number

LO7000110427.

3. The date the dissolution was approved: 9/16/08

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).

Close bussiness.

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.

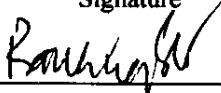
6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

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

Barb Van Noyen