

LO8000008914

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

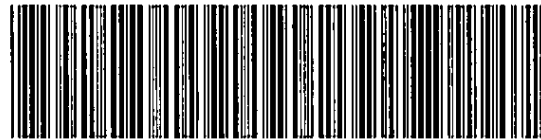
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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03/22/21--01014--008 \*\*25.00

2021 MAR 22 AM 6:24  
CLERK OF COURT  
CLERK OF COURT

O SIMMONS

MAY 27 2021

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: TOMATO VINE ARTS

(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:

Theodora K. Richmond

(Name of Person)

(Firm/Company)

1102 N. Arcadia Ave.

(Address)

Arcadia, FL. 34266

(City/State and Zip Code)

For further information concerning this matter, please call:

Theodora Richmond

(Name of Person)

at ( 561 ) 672 9837

(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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

1. The name of a limited liability company is

2022 MAR 22 AM 6:25

Tomato Vine Arts

2. The Articles of Organization were filed on 1-25-2008 and assigned

document number L08000008914

3. The delayed effective date the dissolution is not effective on the date of filing:

(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 not enacted as originally planned.  
Goals and plans have been changed.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Theodora K. Richmond

1102 N. Arcadia Ave.

Arcadia, FL 34266

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:

Theodora K. Richmond

Signature

THEODORA K. RICHMOND

Printed Name

**FILING FEE: \$25.00**