# L080000033915

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SECRETARY OF STATE
ALLAHASSEE FLOATE

D. BRUCE NOV 23 2011 EXAMINER

### **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: COVERED IN CHOCOLATC, 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:		
erica numbert (Name of Person)		
Bl Woodrow St. 算量_		
(Address)  ARR 22 T		
1 CHANDATE LA TIPOLIO		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
(Name of Person) at (321), 207-0454 (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$25.00 Filing Fee & \$55.00 Filing Fee & \$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  COUCHED IN CHOCOLO	ite, uc
2. The Articles of Organization were filed on 310	and assigned document number
3. The date the dissolution was approved:	<del>2</del> 011
<ol> <li>A description of occurrence that resulted in the limited life 608.441, Florida Statutes, (copy 608.441 on back cover life.)</li> </ol>	ability company's dissolution pursuant to section etter)
company never ope another state	ned and moved to
5. CHECK ONE:  All debts, obligations and liabilities of the limite OR- Adequate provision has been made for the debts, 6. All remaining property and assets have been distributed a rights and interests.	, obligations and liabilities pursuant to s. 608.4421.
7. CHECK ONE:	
There are no suits pending against the company i	in any court.
	action of any judgment, order or decree which may be
Signatures of the members having the same percentage of mem	abership interests necessary to approve the dissolution:
Signature A	Printed Name
Blackettet	enca huber -
	FILED 11 MOV22 M 2:07 ECRETARY OF STATE AHASSEE, FLORIDA
	SSEN SSEN
	—————————————————————————————————————
	MOV 22 MM 2: D7 AHASSEE, FLORIDA
	<b>A 7</b>

FILING FEE: \$25.00