

108000032445

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

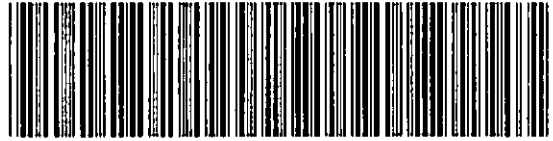
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

3-16-20

Office Use Only



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02/03/20--01032--001 **25.00

20 FEB -3 PM 3:27

20 MAR 15 PM 2:35

MAR 17 2020
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MAR 02 2020
C McNAIR

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Women Angels TCC, 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:

Barbara Boxer

(Name of Person)

(Firm/Company)

1143 LINDA Flora Drive

(Address)

Los Angeles, CA 90049

(City/State and Zip Code)

20 MAR 15 PM 2:35
RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

For further information concerning this matter, please call:

Barbara Boxer

(Name of Person)

at (386) 972-0020

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee and Certificate of Dissolution
see attached letter \$25 already paid so credit applies to this

☐ \$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

20 MAR 16 PM 2:35
Filing Office - State of Florida

1. The name of a limited liability company is

WOMEN Angeles TCC, LLC

2. The Articles of Organization were filed on April 2008 and assigned

document number L0300003245

3. The delayed effective date the dissolution if not effective on the date of filing: 3/10/2020 date of this form Recd 6/11
(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).

For 90 consecutive days the Company has had no members.

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

Barbara K. Boxer

1143 Linda Flora Drive

Los Angeles, CA 90049

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

Barbara K. Boxer
Printed Name

FILING FEE: \$25.00