LD800009361

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(6)		- 40
(CII	ty/State/Zip/Phone	÷ #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Do	cument Number)	
Cardified Carrier	Contificator	of Status
Certified Copies	_ Certificates	OF STATUS

Special Instructions to Filing Officer:

L. SELLERS

APR 1 5 2010

EXAMINER

Office Use Only



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04/14/10--01023--001 **25.00

10 APR 14 PM 3: 20
SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: DOLCE AMICI, 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:		
Amanda Sawyer		
(Name of Person)		
Dalas Amisi II.C		
Dolce Amici, LLC (Firm/Company)		
10032 Cypress Shadow Ave.		
(Address)		
Tampa, FL 33647		
(City/State and Zip Code)		
For further information concerning this matter, please call:	•	
Amanda Sawyer at (813) 758-8257		
(Name of Person) (Area Code & Daytime Telephone Numb	рег)	
Enclosed is a check for the following amount:		
\$25.00 Filing Fee & S60.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee & Certified Copy	Status &	
MAILING ADDRESS: STREET/COURIER ADDR	RESS:	
Registration Section Registration Section Division of Corporations Division of Corporations	<u> </u>	
P.O. Box 6327 Clifton Building		
Tallahassee, FL 32314 2661 Executive Center Circle	. 2661 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is Dolce Amici, LLC	
2. The Articles of Organization were filed on L08000069361	and assigned document number
3. The date the dissolution was approved: 12-31-200	9
4. A description of occurrence that resulted in the limited lia 608.441, Florida Statutes, (copy 608.441 on back cover le There is written consent by all of the	bility company's dissolution pursuant to section etter).
liability company, Dolce Amici, LLC	, for the company to be
dissolved and all of its affairs to be o	oncluded.
5. CHECK ONE:	
All debts, obligations and liabilities of the limited	* * * * * * * * * * * * * * * * * * * *
	obligations and liabilities pursuant to s. 608.4421.
All remaining property and assets have been distributed a rights and interests.	mong its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the company i	n any court.
Adequate provision has been made for the satisfa entered against it in any pending suit.	ction of any judgment, order or decree which may be
Signatures of the members having the same percentage of mem	bership interests necessary to approve the dissolution:
Signature	Printed Name
Cur le Jam	Amenda Saure
Pari Mudd-	Ancie Quach
to your comments	Trigre Guart
	ASS. 4
	FOR PA
FILING FEE	0RIDA

Dissolution of Dolce Amici, LLC

I, Amanda Sawyer, and I, Angie Quach,

agree to dissolve our company, Dolce Amici, LLC, and conclude all business matters in relation to this company.

All monies and debts have been equally disbursed.

Amanda Saywer

Angie Quach

417/2010

|11|2610

INITIALS

Dissolution as of: AR 12/31/2009

10 APR IL PH 3: 20
SECRETARY OF STATE