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### **COVER LETTER**

TO:

Registration Section
Division of Corporations

## Dustbunnies of the Emerald Coast LLC

SUBJECT:

(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:

## Terri Kupski & Sonia Roth (Name of Person) Duetburnios of the Emerald of

## Dustbunnies of the Emerald Coast LLC

(Firm/Company)

136 Oyster Lake Drive

(Address)

Santa Rosa Beach, FL 32459

(City/State and Zip Code)

For further information concerning this matter, please call:

Terri Kupski	850 at (	622-3346
(Name of Person)	(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/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  Dustbunnies of the Emerald Coast LLC			
2.	The Articles of Organization were filed on Sep	otember 24, 2008	and assigned	
	document number L08000091193			
3.	The delayed effective date the dissolution if no (effective date cannot be prior to Note: If the date inserted in this block does not me listed as the document's effective date on the Depart	et the applicable statutory filing re	ocument is received for ming)	
4.	A description of occurrence that resulted in the 605.0707, Florida Statutes, (copy 605.0707 on b	limited liability company's dispack cover letter).	ssolution pursuant to section	
	Owners retired and closed company.			
5.	If there are no members, enter the name and add activities and affairs:	dress of the person appointed to	o wind up the company's	
	<del></del>			
			75 2119 17 17 17 17 17 17 17 17 17 17 17 17 17 1	
			PR T	
6. Iis	Signature of an authorized person or if there are ted above to wind up the company's activities are	e no members, the signature of nd affairs:		
	A Kup di	TERRIL.X	upple s	
	Signature	Printed	Name	

**FILING FEE: \$25.00**