L08000 114729

Office Use Only



900282750079

03/07/16--01022--014 **25.00



COVER LETTER

TO: Registration Section Division of Corporations

Þ

SUBJECT: J	PHN ANDREW	HAIR DESIGNS LO	<u>e</u>
DOCUMENT NU	MBER: <u>L08000</u>	0114-229	
The enclosed Notic	e of Limited Liability (Company Dissolution and	fee are submitted for filing.
Please return all co	rrespondence concerning	this matter to the following	ıg:
	JOHN 4	NSER_ Contact Person)	
	(Name of C	Contact Person)	
JOH	tn Anophic (Firm	HAIR DESIGN (Company)	os he
2064	BASLANDE.	DR.	
	(* - *		
Breyn	DON FZ	ze and Zip Code)	
	(City/Stat	e and Zip Code)	
For further informa	tion concerning this mat	ter, please call:	
TOHUL	1 1 N 05:10 -	at (813) 80	73-2278
(Name o	f Contact Person)	(Area Code) (I	33-2278 Daytime Telephone Number)
Enclosed is a check	for the following amou	nt:	
\$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status &

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment 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
	JOHN ANDREW HMRDESIGNS LC
2.	The Articles of Organization were filed on 12/11/2008 and assigned
	document number
3.	The delayed effective date the dissolution if not effective on the date of filing: 2/29/20/16 (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).
	RETIREMENT (JOHNLINGE)
	T _S : 3
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs: JOHN GNSER SEL
	119 ThUELN.
	BRANDON FL 235/1 BET 5
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:
(John Man JOHN LINGER
	Signature Printed Name
1	FILING FEE: \$25.00