

LD9 000060414

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2014 MAY -7 PM 2:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 13 2014

1 CLINE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DAILY CLEANSING 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:

Ruth Kacan / Michael Kacan
(Name of Person)
Daily Cleansing LLC
(Firm/Company)
8524 Old Country Manor #107
(Address)
Davie Florida 33328
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Ruth Kacan at 201 887 1567
(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

DAILY CLEANSING LLC

2. The Articles of Organization were filed on 06-22-2009 and assigned

document number L09000060414

3. The delayed effective date the dissolution if not effective on the date of filing: _____
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

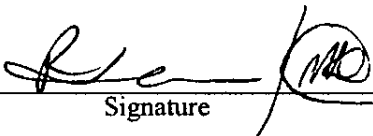
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

Business was sold on
March 31 2014

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

Ruth Kacan / Michael Kacan
8524 Old Country Manor
#107 Davie FL 33328

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

MICHAEL KACAN
RUTH KACAN
Printed Name

FILING FEE: \$25.00

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ALLIANCE FLORIDA

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