109000077913

···
(Requestor's Name)
(Address)
((daisse)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Sociality (Sociality)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300165660253

01/19/10--01013--007 **35.00



C. LEWIS

JAN 28 2010

EXAMINER



January 20, 2010

RAMON MENDOZA / JENNY FASHION LLC 4899 CANAL DR. LAKE WORTH, FL 33463

SUBJECT: JENNY FASHION LLC Ref. Number: L09000077913

We have received your document for JENNY FASHION LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a corporation, but your entity is a limited liability company. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Letter Number: 610A00001585

Carolyn Lewis Regulatory Specialist II Registration/Qualification Section

Division of Comparations DO DOV 6997 Tollahosson Florida 99914

COVER LETTER

Division of Corporations
SUBJECT: Jenny Fashion LLC (Name of Limited Liability Company)
(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:
Ramon Mendoza
(Name of Person)
Jenny Fashion LLC (Firm/Company)
4899 Canal DRIVE
(Address)
Lake Worth Florida 33463
(City/State and Zip Code)
For further information concerning this matter, please call:
Ramon Mendoza at 561, 396-8132
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$\int_{\text{S25.00 Filing Fee}} \text{30.00 Filing Fee & Certificate of Status} \text{\$\text{S55.00 Filing Fee} & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{\$\text{Certified Copy (additional copy is enclosed)}} \$\text{C

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

FILED

2010 JAN 27 AM 9: 58

SECRETARY OF STATE TALLAHASSEE, FLORIDA 1. The name of a limited liability company is noidza 2. The Articles of Organization were filed on and assigned document number 3. The date the dissolution was approved: 4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter). 5. CHECK ONE: All debts, obligations and liabilities of the limited liability company have been paid or discharged. Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421. 6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests. 7. CHECK ONE: There are no suits pending against the company in any court. Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit. Signatures of the members having the same percentage of membership interests necessary to approve the dissolution: Printed Name Signature. amon