L09000090714

•		
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name) LO9-90714		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
Special instructions to I limit Officer.		
-		
•		
,		

Office Use Only



000163662130

01/21/10--01037--004 **25.00

10 JAN 21 PH 4: 07
SECRETARY OF STATE

COVER LETTER

Division of Corporations		
SUBJECT: THE BOUTI QUE, 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:		
MONICA ECHEVARRIA (Name of Person)		
THE BOUTI QUE, LLC (Firm/Company)		
6287 SW 39TH ST. (Address)		
(Address)		
MIAMI, FL 33155 (City/State and Zip Code)		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
MONICA ECHEJARKIA at (305) 519. 4151 (Name of Person) (Area Code & Daytime Telephone Number)		
(Alea Code & Daytine Pelephone Number)		
Enclosed is a check for the following amount:		
\$25.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed)		
MAILING ADDRESS: STREET/COURIER ADDRESS:		

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

Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



January 11, 2010

MONICA ECHEVARRIA 6287 SW 39TH STREET MIAMI, FL 33155

SUBJECT: THE BOUTIQUE, LLC Ref. Number: L09000090714

We have received your document for THE BOUTIQUE, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return 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) 245-6067.

Letter Number: 610A00000719

Neysa Culligan Regulatory Specialist II

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED 10 JAN 21 PM 4: 07

1. The name of a limited liability company is THE BOUTIOUE, U.C.	SECRETARY OF STATE TALLAHASSEE, FLORIDA
,	21/2009 and assigned document number
3. The date the dissolution was approved: $1/4/3$.010
4. A description of occurrence that resulted in the limited 608.441, Florida Statutes, (copy 608.441 on back cover	liability company's dissolution pursuant to section letter).
NEVER STARTED BUSINESS	
5. CHECK ONE:	
	ted liability company have been paid or discharged. s, obligations and liabilities pursuant to s. 608.4421.
All remaining property and assets have been distributed rights and interests.	among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the company -OR- Adequate provision has been made for the satis entered against it in any pending suit.	faction of any judgment, order or decree which may be
Signatures of the members having the same percentage of me	mbership interests necessary to approve the dissolution:
Signature	Printed Name
Marcaghen	MONICA ECHEVARRIA