

| (R | equestor's Name) | - | | |
|---|----------------------|----------|--|--|
| (A | ddress) | | | |
| (A | ddress) | | | |
| (C | ity/State/Zip/Phone# |) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (B | usiness Entity Name |) | | |
| (Document Number) | | | | |
| Certified Copies | Certificates of | f Status | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
| | | | | |
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| | | | | |

Office Use Only

G. MCLEOD

OCT 13 2010

EXAMINER



500186379705

10/12/10--01032--004 **25.00

10 OCT 12 PM 1: 02

COVER LETTER

| | stration Section ion of Corporations | | |
|------------------|---|---|--|
| CUR INCT. | Lashes and More LLC | | |
| SUBJECT: 2 | (Name of Lin | mited Liability Company) | |
| | | | |
| The enclosed | Articles of Dissolution and fee(s) are sub- | mitted for filing. | |
| Please return a | all correspondence concerning this matter | to the following: | |
| | Gary Widett | | |
| | | Name of Person) | |
| | | | |
| | (| Firm/Company) | |
| | 109 Windsor Pointe | | |
| | | (Address) | |
| | Palm Beach Gardens, F | FL 33418 /State and Zip Code) | |
| | (City) | State and Zip Code) | |
| For further inf | formation concerning this matter, please of | call: | |
| Ga | ry Widett | at (561) 799 | |
| | (Name of Person) | (Area Code & Daytime | Telephone Number) |
| Enclosed is a cl | neck for the following amount: | | |
| \$25.00 Filing | 30.00 Filing Fee & Certificate of Status | \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | MAN INC ADDDDGG | CTD DET/COV | DIED ADDRESS |

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

10 OCT 12 PM 1: 02
SECRETARY OF STATE

| 1. The name of a limited liability company is | IALLAHASSEE. FLORIDA |
|---|---|
| Lashes and More LLC | |
| 2. The Articles of Organization were filed on Sept 2 L09000091079 | 1, 2009 and assigned document number |
| 3. The date the dissolution was approved: 12/30/09 | · |
| 4. A description of occurrence that resulted in the limited 608.441, Florida Statutes, (copy 608.441 on back coverage) Lack of business | d liability company's dissolution pursuant to section er letter). |
| | |
| 5. CHECK ONE: | |
| | nited liability company have been paid or discharged. |
| OR-Adequate provision has been made for the de | bts, obligations and liabilities pursuant to s. 608.4421. |
| All remaining property and assets have been distribute rights and interests. | ed among its members in accordance with their respective |
| 7. CHECK ONE: | |
| There are no suits pending against the compa | ny in any court. |
| Adequate provision has been made for the sate entered against it in any pending suit. | tisfaction of any judgment, order or decree which may be |
| ignatures of the members having the same percentage of m | nembership interests necessary to approve the dissolution: |
| Signature | Printed Name |
| My Walt | Gary Widett |
| 7 | |
| | |
| Market Mark Mark Mark Mark Mark Mark Mark Mark | |
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