

LO9000118821

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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17 JAN 25 AM 10:04

JAN 26 2017
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Belly Hip Moves 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:

Yamile Haibi
(Name of Person)

Belly Hip Moves LLC
(Firm/Company)

697 Pinecrest Drive
(Address)

Largo, FL 33770
(City/State and Zip Code)

For further information concerning this matter, please call:

Yamile Haibi at (727) 559-2873 or
(Name of Person) (Area Code & Daytime Telephone Number)
305-801-6232

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

Belly Hip Moves, LLC

2. The Articles of Organization were filed on 12/14/2009 and assigned

document number L09000118821

3. The delayed effective date the dissolution if not effective on the date of filing: date of filing
(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).

business not profitable

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

Yamile Haibi

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:

Yamile Haibi
Signature

Yamile Haibi

Printed Name

FILING FEE: \$25.00

FILED
CLERK OF STATE
CORPORATION

17 JAN 25 AM 10:04