

210000804974

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

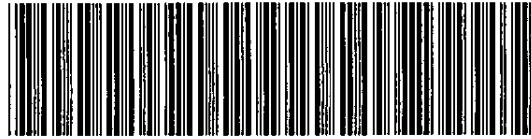
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 OCT 14 PM 1:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 15 2015
J SHIVERS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 2, 2015

TONI ESCO
12180 SE US HWY 441
BELLEVIEW, FL 34420

SUBJECT: TLC CONSIGNMENT AND THRIFT SHOP, LLC
Ref. Number: L10000004974

We have received your document for TLC CONSIGNMENT AND THRIFT SHOP, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 215A00018545

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TLC Consignment and Thrift Shop, LLC
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Certificate of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Toni Esco
(Contact Person)

12080 (Firm/Company)

12180 SE US Hwy 441
(Address)

Bellevue, Florida 34420
(City, State and Zip Code)

For further information concerning this matter, please call:

Toni Esco at (352) 502-3313
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$52.50 Filing Fee ☐ \$61.25 Filing Fee and Certificate of Status ☐ \$105.00 Filing Fee and Certified Copy ☐ \$13.75 Filing Fee, Certified Copy, and Certificate of Status

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

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

COVER LETTER

TO: Registration Section
Division of Corporations

EFFECTIVE DATE 1/11/2010

SUBJECT: TLC Consignment and Thrift Shop, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Carole Anne DeLucian
Name of Person

Firm/Company

576 SE 43rd Street
Address

Ocala, Florida 34480
City/State and Zip Code

delucianmsrld@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carole DeLucian
Name of Person

at (352) 854-0256
Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☒ \$160.00 Filing Fee, Certificate of Status & 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

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SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
10 JAN 13 AM 9:51

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

TLC Consignment and Thrift Shop, LLC

2. The Articles of Organization were filed on January 10, 2013 and assigned

document number L100000004974

3. The delayed effective date the dissolution if not effective on the date of filing: December 31, 2015
(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 closed

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

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TALLAHASSEE, FLORIDA

FILED

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:

X Toni L. Esco
Signature

Toni L. Esco
Printed Name

FILING FEE: \$25.00