L110000025155

| (Requestor's Name) | | | | |
|---|--------------------|-------------|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (Cit | ty/State/Zip/Phone | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | siness Entity Nar | me) | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
| <u>.</u> | | | | |
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SECRETARY OF STATE
ALLAHASSEE, FI-ORIDA

C. LEWIS FEB 1 3 2012 EXAMINER

COVER LETTER

TÖ:

Registration Section
Division of Corporations

| SUBJECT: | OLIVE & OLIVIA OF BOCA, LLC | | | |
|---------------------|---|--|--|--|
| | (Name of Limited Liability Company) | | | |
| The enclosed Ar | ticles of Dissolution and fee(s) are submitted for filing. | | | |
| Please return all | correspondence concerning this matter to the following: | | | |
| | ABISROR, AVISHAG | | | |
| | (Name of Person) | | | |
| | OLIVE & OLIVIA OF BOCA, LLC | | | |
| | (Firm/Company) | | | |
| | 19635 SOUTH STATE ROAD 7 UNIT 37-38 | | | |
| | (Address) | | | |
| | BOCA RATON, FL 33498 | | | |
| | (City/State and Zip Code) | | | |
| For further inform | nation concerning this matter, please call: | | | |
| | ABISROR, AVISHAG at (286) 377-0551 | | | |
| | (Name of Person) (Area Code & Daytime Telephone Number) | | | |
| Enclosed is a check | t for the following amount: | | | |
| \$25.00 Filing Fe | c 30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) 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

فينسف الر

FILED

2012 FEB 1/0 BM 1: 46

| The name of a limited liability company is OLIVE & OLI | VIA OF BOCA | SECRETARY OF STAT TALLAHASSEE, FLORI |
|---|--------------------------------------|--|
| 2. The Articles of Organization were filed on | 03/01/2011 | and assigned document number |
| 3. The date the dissolution was approved:0 | 1/02/2012 | · |
| 4. A description of occurrence that resulted in the lim 608.441, Florida Statutes, (copy 608.441 on back c | ited liability company over letter). | |
| 5. CHECK ONE: All debts, obligations and liabilities of the OR- Adequate provision has been made for the | | |
| 6. All remaining property and assets have been distrib rights and interests. | _ | |
| 7. CHECK ONE: There are no suits pending against the com | nany in any court | |
| OR- Adequate provision has been made for the entered against it in any pending suit. | | dgment, order or decree which may be |
| natures of the members having the same percentage of | f membership interes | is necessary to approve the dissolution: |
| Signature | | Printed Name |
| ABi Roll Awy ha | ABISI | ROR, AVISHAG |
| 1- | | |
| | | |