

L11000041642

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

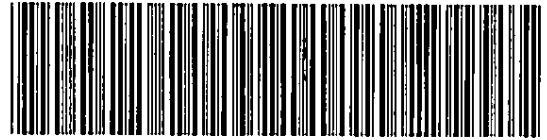
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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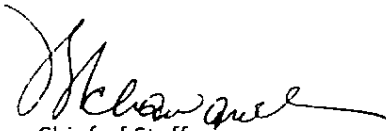
August 9, 2017

To: Florida Department of State  
Division of Corporations

Please dissolve our LLC: CNLB Holdings, LLC immediately.

Thanks,

Regina Schawaroch,



Chief of Staff

CNLB Holdings, LLC

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CNLB Holdings, 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:

Regina Schawaroch  
(Name of Person)

CNLB Holdings LLC  
(Firm/Company)

3333 W. Commercial Blvd, Ste 101  
(Address)

Ft. Lauderdale FL 33309  
(City/State and Zip Code)

For further information concerning this matter, please call:

Regina Schawaroch at (954) 748-2800  
(Name of Person) (Area Code & Daytime Telephone Number)

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

CNLP Holdings, LLC

2. The Articles of Organization were filed on 4/6/2011 and assigned

document number L11000041642

3. The delayed effective date the dissolution if not effective on the 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 has closed

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

Regina Schawarch

3333 W Commercial Blvd

Ste 101

Ft. Lauderdale, FL 33309

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:

[Signature]  
Signature

Regina Schawarch  
Printed Name

**FILING FEE: \$25.00**

For Lisa Goldberg  
Sec: Power of Attorney