

LI 000045054

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

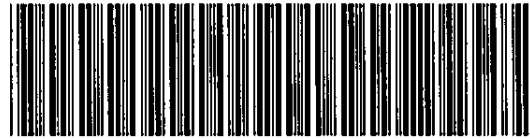
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



400255276604

01/07/14--01010--019 \*\*55.00

16 JAN -7 AM 11:27  
SOLICITORS  
TALLAHASSEE, FLORIDA

J. Shivers JAN 09 2013

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DISSOLUTION OF COMPANY

**DOCUMENT NUMBER:** EIN-45-2020258

The enclosed **Notice of Limited Liability Company Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

PAM HAZELWOOD

(Name of Contact Person)

HAZELWOOD PHOTOGRAPHY

(Firm/Company)

19812 WYNHAM LAKES DRIVE

(Address)

ODESSA, FL 33556

(City/State and Zip Code)

For further information concerning this matter, please call:

PAM HAZELWOOD

(Name of Contact Person)

at ( 813 )

(Area Code)

385-6912

(Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$30 Filing Fee &  
Certificate of Status

☒ \$55 Filing Fee &  
Certified Copy

(Additional copy is enclosed)

☐ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

(Additional copy is enclosed)

**MAILING ADDRESS:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Amendment 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

HAZELWOOD PHOTOGRAPHY

2. The Articles of Organization were filed on APRIL 27, 2011 and assigned  
document number EIN - 45-2020258

3. The delayed effective date the dissolution if not effective on the date of filing: 12/31/13

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).

CLOSED COMPANY  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

Printed Name

Paul Hylton

TAMELA HAZELWOOD

**FILING FEE: \$25.00**

FILED  
14 APR -7 PM 11:29  
TALLAHASSEE FLORIDA