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A		
(F	Requestor's Name)	
(A	ddress)	
A)	address)	
(0	City/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(E	Business Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		

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FILED
12 JUN -6 PH 3: 42
SECRETARI OF STATE
SECRETARISSEE FLORIDA

C. LEWIS

June 7, 2012.

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 10, 2012

RONELL LEVATTE / BIG GATES RECORDS, LLC PO BOX 47142 TAMPA, FL 33646

SUBJECT: EXOTIC LIP GLOSS, LLC

Ref. Number: L11000050595

We have received your document for EXOTIC LIP GLOSS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the members having the same percentage of membership interests necessary to approve the dissolution or the revocation when filing articles of revocation of dissolution.

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.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 612A00014020

COVER LETTER

Division of Corporations			
SUBJECT: EXOTIC LIP GLOSS, LLC			
(Name of Limited Liability Company)			
;			
'he enclosed Articles of Dissolution and fee(s) are submitted for filing.			
lease return all correspondence concerning this matter to the following:			
RONELL LEVATTE			
(Name of Person)			
BIG GATES RECORDS, LLC			
(Firm/Company)			
P.O. BOX 47142			
(Address)			
TAMPA, FL 33646			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
KEISHA PERRY, ESQ. at (404) 733-0201			
(Name of Person) (Area Code & Daytime Telephone Number)			
inclosed is a check for the following amount:			
\$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)			

MAILING ADDRESS:

TO:

Registration Section

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

FILED 12 JUN -6 PM 3: 42

SEGRETARY OF STATE TALLAHASSEE, FLORIDA

1. The name of a limited liability company is EXOTIC LIP GLOSS, LLC	TALLAHASSEE, FLORIDA
2. The Articles of Organization were filed on APRIL 2 L11000050595	28, 2012 and assigned document number
3. The date the dissolution was approved: MAY 1, 20	012
4. A description of occurrence that resulted in the limited 608.441, Florida Statutes, (copy 608.441 on back cover	liability company's dissolution pursuant to section letter).
Pursuant to Section 608.441(1)(c) of the Fupon the written consent of all the mer	
5. CHECK ONE:	
-OR-	ted liability company have been paid or discharged. ts, obligations and liabilities pursuant to s. 608.4421.
 All remaining property and assets have been distributed rights and interests. 	
7. CHECK ONE: There are no suits pending against the company	v in any court
-OR-	sfaction of any judgment, order or decree which may be
ignatures of the members having the same percentage of me	embership interests necessary to approve the dissolution:
Signature	Printed Name
	Rorell Levatte