L11000053622

(Re	equestor's Name)	
(Ac	dress)	
(Ad	dress)	
(Ci	ty/State/Zip/Phone	e #0
<u></u>	WAIT	<u></u>
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		1

Office Use Only



200262456602

07/23/14--01023--011 **25.00



COVER LETTËR

U BJECT :		ed Liability Compar	av)
	(Name of Limb	ed Liability Compar	19)
ie enclose	ed Articles of Dissolution and fee(s) are submitt	ted for filing.	
ease retur	n all correspondence concerning this matter to	the following:	
	Atef Khalil		
	(Nan	ne of Person)	
	Holy Land Fashion		
	(Fire	n/Company)	_
	10511 Goshawk PL		
	(Address)	
	Riverview, FL 33578		
	(City/Sta	ite and Zip Code)	
or further	information concerning this matter, please call:		
Α	tef Khalil	813	900-3393
	(Name of Person)		ode & Daytime Telephone Number)
nclosed is a	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

FILED 20% JUL 23 PM 12: 04

SEGLITARY OF STATE TALLARASSEE, FLORIDA

1.	The name of a limited liability company is Holy Land Fashion, LLC
2.	The Articles of Organization were filed on 05/06/2011 and assigned
	document number L11000053622
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)
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). The business of which this LLC has been operating is to be dissolved.
	There is no future expectatio to open any business activity under this LLC.
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. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs:
7	Signature ATEFICHAUL Printed Name
	FILING FEE, \$25.00

FILING FEE: \$25.00