

#L11000054660

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

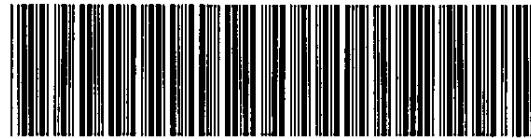
(Business Entity Name)

(Document Number)

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2014 FEB 10 PM 4:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
FEB 12 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Staci Boles Photography
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Staci Boles
Name of Person

Staci Boles Photography
Firm/Company

2924 Sundance Lane
Address

Cantonment FL 32533
City/State and Zip Code

Staci.boles@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Staci Boles at (850) 380-3313
Name of Person Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

2014 FEB 10 PM 4:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Staci Boles Photography

2. The Articles of Organization were filed on May 6, 2011 and assigned
document number L11000054660

3. The delayed effective date the dissolution if not effective on the date of filing: 02/01/2014 (filing date)

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).

no business, I have a full-time job and have decided that I do not
have time to invest in this additional business. I have decided to close.

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

Staci Boles
2921 Sundance Lane
Contonment, FL 32533

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

Staci A. Boles

Staci A. Boles

FILING FEE: \$25.00