

L11000073956

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

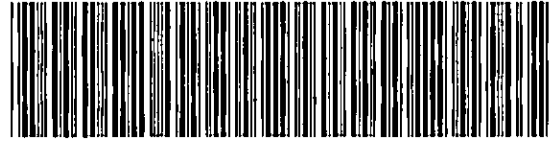
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400391171444

07/21/22--01013--003 **65.00

FILED
2022 JUL 21 AM 11:25
SECRETARY OF STATE
TALLAHASSEE, FL

C. BRUMBLEY
SEP 23 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Amys Purple Mermaid Garden, 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:

Noemi Holst
(Name of Person)

Amys Purple Mermaid Garden
(Firm/Company)

1921 NW 111th Ave
(Address)

Pembroke Pines FL 33026-2256
(City/State and Zip Code)

For further information concerning this matter, please call:

Noemi Holst at (954) 483-7125
(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

Amy's Purple Mermaid Garden

2. The Articles of Organization were filed on 6/27/2011 and assigned

document number L11000073956

3. The delayed effective date the dissolution if not effective on the date of filing: 9/30/2022
(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 been slow. Lost
interest. Barely breaking even.
Need room for other use.

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

Noemi Holst
1921 NW 111th Ave
Pembroke Pines FL 33026-2256

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:

Noemi Holst
Signature

Noemi Holst
Printed Name

FILING FEE: \$25.00

2022 JUL 21 AM 11:25
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

43