

L11000126036

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

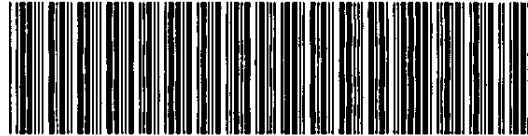
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400279297404

12/30/15--01006--004 **25.00

2016 DEC 30 AM 8:11
J. HARRIS
TALLAHASSEE FLORIDA

JAN 04 2016
J. HARRIS

JAN 04 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Beauty By Kerri 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:

Kerri Cagle

(Name of Person)

(Firm/Company)

184 Sea Colony Pkwy.

(Address)

Saint Augustine, FL. 32080

(City/State and Zip Code)

For further information concerning this matter, please call:

Kerri Robison

(Name of Person)

at 904 669-1047

(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/COURIER ADDRESS:
Registration 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

Beauty By Kerri LLC.

2. The Articles of Organization were filed on 12/29/2015 and assigned

document number L11000126036

3. The delayed effective date the dissolution if not effective on the date of filing: 12/29/2015
(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 Closed. No longer operational.

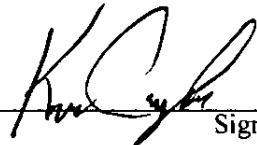
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Kerri Cagle

184 Sea Colony Pkwy

Saint Augustine, FL. 32080

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

FILING FEE: \$25.00

2015 DEC 30 AM 8:11
FILING OFFICE
TALLAHASSEE FLORIDA

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: Beauty By Kerri LLC.

Document number of Limited Liability Company is: 65-8015765238-2 L11000126036

Date of dissolution was: 12/29/2015

Description of information that must be included in a written claim:

Business Closed and no longer operational.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

184 Sea Colony Pkwy.

Saint Augustine, FL. 32080

2015 DEC 30 AM 8:11
CLERK OF STATE
TALLAHASSEE, FLORIDA

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

KERRI CAGLE

Printed Name of the Person Filing

Kerri Cagle

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00