

L12000020719

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

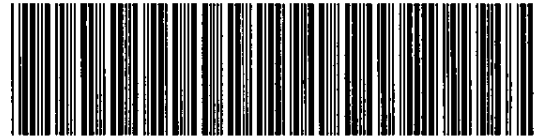
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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01/31/14--01008--009 **25.00

STATE OF
FLORIDA
14 JAN 31 2014
10:00 AM

J. Stivers FEB 04 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MAYA'S PLACE Thrift Store 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:

MARJORIE COCHRAN
(Name of Person)

N/A
(Firm/Company)

8001 ROSE TERR.
(Address)

LARGO FLA 33777-3021
(City/State and Zip Code)

For further information concerning this matter, please call:

MARJORIE COCHRAN at (727) 600-1579
(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/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

MAYA'S Place Thrift Store LLC

2. The Articles of Organization were filed on Feb 13 2012 and assigned
document number L12000020719

3. The delayed effective date the dissolution if not effective on the date of filing: Dec 31 2013

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).

Closed Business

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

MARJORIE COCHRAN
8001 ROSE TERR.
LARGO, FLA 33777-3021

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

Marjorie Cochran

MARJORIE COCHRAN

FILING FEE: \$25.00

RECEIVED
TALLAHASSEE, FLORIDA
14 JAN 21 2013
10:00 AM