

LI 2000033587

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

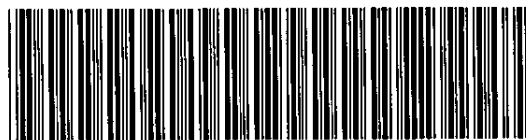
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400259048444

05/06/14--01001--011 **25.00

APPROVED
FILED
14 MAY -5 PM 4:05
STATE OF FLORIDA
TALLAHASSEE

B. BOSTICK

MAY - 5 2014

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Artscarf and Upcrafting 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:

Patrice Brown / Janice Torrey
(Name of Person)

Artscarf and Upcrafting
(Firm/Company)

3539 Apalachee Pkwy #163
(Address)

Tallahassee, FL 32311
(City/State and Zip Code)

For further information concerning this matter, please call:

Patrice Brown at (805) 742-1161
(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

14 MAY -5 PM 4:06

APPROVED
FILED

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Artscarf and Upcrafting, LLC

2. The Articles of Organization were filed on March 13 2012 and assigned

document number 612000035587

3. The delayed effective date the dissolution if not effective on the date of filing: On date of filing
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

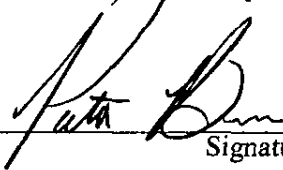
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

Not able to make needed profit for goods and items
manufactured. Imminent move from state.

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

Patrice Brown
3539 Apalachee Pkwy #163
Tallahassee, FL 32311

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

Patrice Brown
Printed Name

FILING FEE: \$25.00

14 MAY -5 PM 14:06
STATE OF FLORIDA
DEPT. OF REVENUE
TALLAHASSEE, FL 32311

APPROVED
AND
FILED

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: Artscraft and Upcrafting LLC

Document number of Limited Liability Company is: 212000035587

Date of dissolution was: May 4, 2014

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

14 MAY -5 PM 4:06
FILED
APPROVED
AND
FILED

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

Artscraft and Upcrafting LLC
3539 Apalachee Pkwy #163
Tallahassee, FL 32311

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.

Patrice Brown

Printed Name of the Person Filing

Pat Brown

Signature of the Person Filing

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