

L12000038719

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

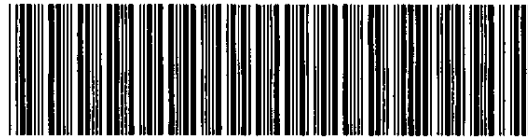
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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Office Use Only



000263956160

09/08/14--01053--015 **25.00

FILED
14 SEP - 8 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch SEP 12 2014

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

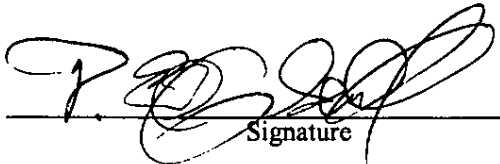
1. The name of a limited liability company is
Elif's Special Touch LLC.
2. The Articles of Organization were filed on 9/16/2012 and assigned
document number L12000038719.
3. The delayed effective date the dissolution if not effective on the date of filing: _____
(effective date cannot be prior to or 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).
No previous work till upcoming.

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

3220 NW 21 St.

Gainesville, Fl. 30605

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

D. Eliff Sewell

Printed Name

FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA

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