LIROOC	059071
(Requestor's Name) (Address)	000257630200
(Address) (City/State/Zip/Phone #)	
(Business Entity Name)	03/24/1401010027 **35.00
(Document Number) Certified Copies Certificates of Status	2111 APR 25 P
Special Instructions to Filing Officer:	OF STATE
Office Use Only	
	APR 3.0 2014 D. BRUCE



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 4, 2014

JANE BATTLE 10061 SW 57 COURT PINECREST, FL 33156

SUBJECT: TROPICAL SPICE LIVING, LLC Ref. Number: L12000052071

We have received your document for TROPICAL SPICE LIVING, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 414A00007245



www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO: Registration Section Division of Corporations

TROPICAL SPICE LIVING (Name of Limited Liability Company) SUBJECT:

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JANE BAJALE		
(Name of Person)		
TROPICAL SPICE LIVING		
(Firm/Company)		
10061 5W 57 Cover		
(Address)		
PINECKEST, 12 33156		
(City/State and Zip Code)		

For further information concerning this matter, please call:

at (<u>305</u>) <u>987 5090</u> (Area Code & Daytime Telephone Number) Name of Person)

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)

LPR 25 PH I: ---

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

	TROPICAL GPICE LIVING	20
2. The Articles of (Drganization were filed on 04/16/12	and assigned
document numbe	112 0000 60071	

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).

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

on Va ž 6. Signature of an authorized person or if there are no members, the signature of the person appointed a listed above to wind up the company's activities and affairs: 5 P Signature Name

FILING FEE: \$25.00