# 112000079478

(Requestor's Name)		
(Address)		
(Address)		
(Cib.(Chata 77)n/Dhana 40		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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**S Warren** NOV 03 2016

#### **COVER LETTER**

TO:

Registration Section Division of Corporations

## LIVOBOOKS PUBLISHING, LLC

SUBJECT:

(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:

Marta Pena

(Name of Person)

Bookkeeping and Beyond

(Firm/Company)

225 E Dania Beach Blvd #211

(Address)

Dania Beach FL 33004

(City/State and Zip Code)

For further information concerning this matter, please call:

Marta Pena at (954) 922-3225
(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 co	
2.	The Articles of Organization were	e filed on Feb 23, 2015 and assigned
	document number L12000079478	<del> </del>
3.	Note: If the date inserted in this blo	assolution if not effective on the date of filing: 10/26/2016 annot be prior to or more than 90 days later than date document is received for filing) ock does not meet the applicable statutory filing requirements, this date will not be ate on the Department of State's records.
4.	A description of occurrence that 605.0707, Florida Statutes, (copy	resulted in the limited liability company's dissolution pursuant to section 605.0707 on back cover letter).
	Business closed. No activity	
5.	If there are no members, enter the activities and affairs:	e name and address of the person appointed to wind up the company's
6. lis	Signature of an authorized persor sted above to wind up the company	n or if there are no members, the signature of the person appointed and y's activities and affairs:
	/ Shut	Ronald Durchfort
	Signature	Printed Name

FILING FEE: \$25.00

FILED 2016 HOW -2 A & 33 SECRETARY OF STATE