

L12 0000 79946

(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



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05/19/14--01044--018 **25.00

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2014 MAY 19 PM 2:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

L12-79946

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Rachel Zilian Bookkeeping & Tax Service 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:

Rachel Zilian-Murphy (spangler)
(Name of Person)

(Firm/Company)

1105 SE 6th St
(Address)

Cape Coral FL 33990
(City/State and Zip Code)

For further information concerning this matter, please call:

Rachel Zilian-Murphy at (239) 440-9535
(Name of Person) (spangler) (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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

1. The name of a limited liability company is

Rachel Zilian Bookkeeping & Tax Service LLC

2. The Articles of Organization were filed on 5/14/2014 and assigned

document number _____

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).

This Company has not done any business since
2012.

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

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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:

Rachel Zilian-Murphy
Signature
(Spangler)

Rachel Zilian-Murphy
Printed Name
(Spangler)

FILING FEE: \$25.00

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: Rachel Zilian Bookkeeping & Tax Service LLC

Document number of Limited Liability Company is: L120000799416

Date of dissolution was: 5/14/2014

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

Company is no longer in business

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

1105 SE 6th - JLR

Cape Coral FL 33990

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.

Rachel Zilian-Murphy
Printed Name of the Person Filing
(spangler)

Rachel Zilian-Murphy
Signature of the Person Filing
(spangler)

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

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TALLAHASSEE, FLORIDA

FILED