

L120000086947

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

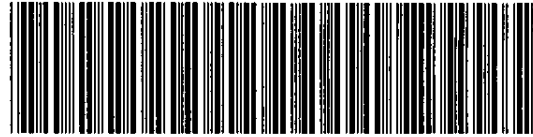
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2014 JAN 23 PM 1:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN 28 2013

T. HAMPTON

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Bettys Dream 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:

Christine M Stallings  
(Name of Person)

Bettys Dream LLC  
(Firm/Company)

5561 SE MEADOW SPRINGS Blvd.  
(Address)

STUART FL 34997  
(City/State and Zip Code)

For further information concerning this matter, please call:

Christine Stallings at ( 772 ) 288-1280  
(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 company is

Bettys Dream LLC

2. The Articles of Organization were filed on July 2 2012 and assigned  
document number 46-0648564 L12000086947

3. The delayed effective date the dissolution if not effective on the date of 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).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

CHRISTINE M STALLINGS  
5561 SE MEADOW SPRINGS BLVD  
STUART FL 34997

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



Printed Name

CHRISTINE M STALLINGS

**FILING FEE: \$25.00**

**FILED**  
**2014 JAN 23 PM 14 38**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**