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04/04/17--01006--010 **25.00

EFFECTIVE DATE

4/19

APR 04 2017

S. YOUNG

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 APR -3 PM 2:49

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dessie Marie 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:

Susan Nichols
(Name of Person)

Dessie Marie LLC
(Firm/Company)

13149 Greengage Lane
(Address)

Tampa, FL 33612
(City/State and Zip Code)

RECEIVED
TALLAHASSEE, FL
47 APR -3 PM 2:49

For further information concerning this matter, please call:

Susan Nichols at 813 735-9100
(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

Dessie Marie LLC

2. The Articles of Organization were filed on 8/7/2012 and assigned

document number L12000101609

3. The delayed effective date the dissolution if not effective on the date of filing: April 19, 2017
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

At the beginning of 2015, my business partner left
the company to begin other endeavors. I continued to
run the company until the 1st of January 2017. I work a
fulltime job and can't continue to run the business.

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

Susan Nichols
13149 Greengage Lane
Tampa, FL 33612

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:

Susan Nichols
Signature

Susan Nichols
Printed Name

FILING FEE: \$25.00

17 APR -3 PM 2:43
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