

L12 000107691

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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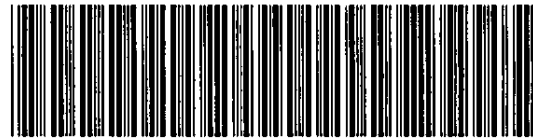
(Business Entity Name)

(Document Number)

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06/19/14--01020--023 **55.00

FILED
JUL 19 2014
TALLAHASSEE, FLORIDA

14 JUL 19 PM 2:40

2/11

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lezbro 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:

Jennifer Arnold
(Name of Person)

Lezbro LLC.
(Firm/Company)

3390 Foxcroft Cir
(Address)

Oviedo, FL 32765
(City/State and Zip Code)

For further information concerning this matter, please call:

Jennifer Arnold at (904) 634-8977
(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

Lezbro LLC.

2. The Articles of Organization were filed on August 20, 2012 and assigned

document number L12000107691

3. The delayed effective date the dissolution if not effective on the date of filing: 7/1/14
(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).

The person appointed could no longer run the
LLC's activities and affairs. The LLC mentioned above,
failed to make a profit.

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

Jennifer Arnold

3390 Foxcroft Cir

Oviedo, FL 32765

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

Jennifer Arnold
Printed Name

FILING FEE: \$25.00

FILED
JUN 19 2014
08:24:40
CLERK OF CIRCUIT COURT
JENNIFER ARNOLD