# 42000054467

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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05/17/16--01014--015 \*\*25.00



MAY 1 8 2016 J SHIVERS

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: L. Wagner UC		
(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:		
melissa wagner		
(Name of Person)		
(Firm Company)		
( min day panty		
4521 Scotch Vine Ct		
(Address)		
<u> </u>		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
(Name of Person)  (Name of Person)  (Area Code & Daytime Telephone Number)		
(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:**

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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
	LUXCOUNT (CC.
2.	The Articles of Organization were filed on 12-10-12 and assigned
	document number <u>U2000154467</u>
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).
•	was fired - can with suin
	NEC SEC
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs:
	None
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:
Υ,	Melisa were Printed Name
	FILING FEE: \$25.00