# L12000161415

| <del></del>             |                    |             |
|-------------------------|--------------------|-------------|
| (Re                     | questor's Name)    |             |
|                         |                    |             |
| (Ad                     | dress)             |             |
|                         |                    | ,           |
| (Ad                     | dress)             | ~ · ·       |
|                         |                    |             |
| (Cit                    | ty/State/Zip/Phone | e #)        |
|                         |                    |             |
| PICK-UP                 | WAIT               | MAIL        |
|                         |                    |             |
| (Bu                     | siness Entity Nar  | ne)         |
|                         |                    |             |
| (Do                     | ocument Number)    |             |
| •                       | ,                  |             |
| Certified Copies        | Certificates       | s of Status |
|                         |                    |             |
| <u> </u>                |                    |             |
| Special Instructions to | Filing Officer:    |             |
|                         |                    |             |
|                         |                    | •           |
|                         |                    |             |
|                         |                    |             |
|                         |                    |             |
|                         |                    |             |
| L                       |                    |             |

Office Use Only



300250672053

08/15/13--01007--010 \*\*60.00



#### **COVER LETTER**

| Division of C               |   |   |   |
|-----------------------------|---|---|---|
| SUBJECT:                    | Bella's Unlimit                                 | ed LLC<br>mited Liability Company)  |   |
|                             |   |   |   |
| The enclosed Articles       | of Dissolution and fee(s) are subr              | mitted for filing.  |   |
| Please return all corres    | spondence concerning this matter                | to the following:   |   |
|                             | Chaist  | ophen Palma   |   |
|                             | (1  | Name of Person)   |   |
|                             | Bella's   | · Unlimited LLC Firm/Company)   |   |
| <del></del>                 | (   | Firm/Company)   | <del></del>   |
|                             | 2678 Corby                                      | Dr. Apt 1215  |   |
|                             | Oranje City                                     | State and Zip Code)   |   |
| For further information     | n concerning this matter, please ca             | all:  | •   |
| (                           | Injustrates Palma                               | at ( <u>UO7</u> ) <u>923</u><br>(Area Code & Daytime                      | -2868   |
|                             | (Name of Person)                                | (Area Code & Daytime  | Telephone Number)   |
| Enclosed is a check for the | ne following amount:                            |   |   |
| p \$25.00 Filing Fee        | ρ \$30.00 Filing Fee &<br>Certificate of Status | ρ \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <ul> <li>\$60.00 Filing Fee,</li> <li>Certificate of Status &amp;</li> <li>Certified Copy</li> <li>(additional copy is enclosed)</li> </ul> |
|                             |   |   |   |

#### 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

### FILED 2013 AUG 15 PH 12: 16

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

SECRETARY OF STATE TALLAHASSEE, FLORIDA

| 1. The name of a limited liability company is  Bella's Unlimited LLC  |
|---|
| 2. The Articles of Organization were filed on 12/28/12 and assigned document number 12000161415   |
| 3. The date the dissolution was approved: 8/31/13   |
| 4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter). |
| lack of business  |
| :   |
| 5. CHECK ONE:   |
| All debts, obligations and liabilities of the limited liability company have been paid or discharged.   |
| `☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.   |
| <ol> <li>All remaining property and assets have been distributed among its members in accordance with their respective<br/>rights and interests.</li> </ol>                     |
| 7. CHECK ONE:   |
| There are no suits pending against the company in any courtOR-  |
| Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.                                     |
| gnatures of the members having the same percentage of membership interests necessary to approve the dissolution:  |
| Signature Printed Name  |
| Christopler Palm  |
| Thumbe There TR HERNANDO. PALMA O   |
|   |
|   |
| <del></del>   |