L13000007101

| (Rec | questor's Name) | | | |
|---|-------------------|-----------|--|--|
| (Add | Iress) | | | |
| (Add | iress) | | | |
| (City | /State/Zip/Phone | #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bus | siness Entity Nam | ne) | | |
| (Document Number) | | | | |
| ertified Copies | Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | Office Use Onl | ·v | | |



100307605071

02/15/18--01017--028 ++25.00

18 FEB 16 PM 3: 30

B FIGUEROA FEB 1 9 2018

COVER LETTER

| Division of Corporations | | | |
|---|--|--|--|
| SUBJECT: Ultimate Party Sersations 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: | | | |
| | | | |
| Tamora Batrer (Name of Person) | | | |
| | | | |
| Ultimate Party Sensations | | | |
| 7415 Nash Rd (Address) | | | |
| | | | |
| Grand Ringo FL 32442 (City/State and Zip Code) | | | |
| (City/State and Zip Code) | | | |
| For further information concerning this matter, please call: | | | |
| Tamora Baker at (850, 408-6958 | | | |
| (Name of Person) (Area Code & Daytime Telephone Number) | | | |
| Enclosed is a check for the following amount: | | | |
| \$25.00 Filing Fee and Certificate of Dissolution \$\Bigsup \\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed) | | | |

MAILING ADDRESS:

TO:

Registration Section

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

| ۱. | The name of a limited liability company is Litimate Party Sensations LLC | _ · |
|-----------|--|---------------------|
| 2. | The Articles of Organization were filed on <u>January 14, 2013</u> and assigned | |
| | document number <u>L13000007101</u> | |
| 3. | The delayed effective date the dissolution if not effective on the date of filing: (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 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 see 605.0707, Florida Statutes, (copy 605.0707 on back cover letter). | |
| | Dusiness is closing | 18 F |
| | | 83 83 88 83 |
| | | ָרָה הַ מר בּ |
| | | 18 FEB 1,6 PM 3: 80 |
| 5. | If there are no members, enter the name and address of the person appointed to wind up the company activities and affairs: | s |
| | 7415 NashRd | _ |
| | Grand Ridge, FL 3241/2 | - |
| 6. lis | Signature of an authorized person or if there are no members, the signature of the person appointed an ted above to wind up the company's activities and affairs: | – id |
| | Printed Name Tamoya Baker Printed Name | - |

FILING FEE: \$25.00