

430000 2975

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2015 DEC 18 P 2:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DEC 18 2015  
J. BRUCE

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: Natural Element Fountain Creations 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:

Lorraine K. Goss  
(Name of Person)

Natural Element Fountain Creations  
(Firm/Company)

1182 SE Mendoza Ave  
(Address)

Port St. Lucie, FL 34952  
(City/State and Zip Code)

For further information concerning this matter, please call:

Lorraine Goss at ( 772 ) 284-7322  
(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

SECRETARY OF STATE  
TALLAHASSEE, FL 32301

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**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Natural Element Fountain Creations LLC

2. The Articles of Organization were filed on Feb. 26, 2013 and assigned

document number L13000029786

3. The delayed effective date the dissolution is 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)

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).

Business is being closed because of stolen credit card fraudulent charges were taken, causing financial bankruptcy. This was an international fraud & FBI was notified

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

1182 SE Mendoza Ave.

Port St. Lucie, FL 34982

772-284-4325

& briefed, FBI # case

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CLERK OF STATE  
TALLAHASSEE FLORIDA

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:

Lorraine Goss  
Signature

Lorraine Goss  
Printed Name

FILING FEE: \$25.00