## L130000 43978

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## **COVER LETTER**

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Division of Corporations				
SUBJECT: Moving Mavens of Limited	PLLC "			
(Name of Limited Liability Company)				
	•			
The enclosed Articles of Dissolution and fee(s) are submitted	d for filing.			
Please return all correspondence concerning this matter to th	e following:			
Wendy Wicks				
(Name of Person)				
Sansoth FL 34243				
Samsoth F	L 34243			
(City/State	and Zip Code)			
For further information concerning this matter, please call:				
(Name of Person)	_at (941) 356-9850			
/ (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:	Street Address:			
Registration Section	Registration Section			
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is  Noving Mavens of FLorida LLC	
2.	The name of a limited liability company is  NOVIN MAJENS A FLOTIAL LLC  The Articles of Organization were filed on Masch 21, 2013 and assigned	
	document number <u>L13000043978</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 no listed as the document's effective date on the Department of State's records.	t be
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605,0707. Florida Statutay, (norw 605,0707 or book any platter)	n
	605.0707, Florida Statutes, (copy 605.0707 on back cover letter).	
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	SS. P	
	PH 2: 5	
	FEE S	
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: $ \mathcal{U} \cap \mathcal{U} \subset \mathcal{U} \cap \mathcal{U} $	
6. ah	Signature of an authorized person or if there are no members, the signature of the person appointed and loove to wind up the company's activities and affairs:	isted
	Wendy C. Wicks	
	Signature Pfinted Name	

FILING FEE: \$25.00