

213000071014

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 APR 16 2014

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: COMMERCIAL BUSINESS INTERIORS, 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:

DEBORAH MORRIS  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

1145 INDIANO DRIVE  
(Address)

CELEBRATION, FL 34747  
(City/State and Zip Code)

For further information concerning this matter, please call:

DEBORAH MORRIS at ( 904 ) 304-3995  
(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

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

1. The name of a limited liability company is

COMMERCIAL BUSINESS INTERIORS, LLC

2. The Articles of Organization were filed on MAY 15, 2013 and assigned

document number L13000071014

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)

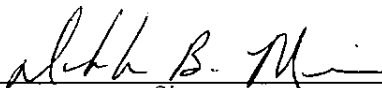
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

I WAS GOING TO ATTEMPT RUNNING THIS BUSINESS  
BUT DECIDED I WAS NOT ABLE TO PURSUE  
I NEVER OPERATED THIS BUSINESS AND WENT  
TO CLOSE THIS BUSINESS DOWN.

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

DEBORAH MORRIS  
757 RIVERVIEW DRIVE  
JACKSONVILLE, GA 32217

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:

  
Signature

DEBORAH B. MORRIS  
Printed Name

**FILING FEE: \$25.00**

FILED  
14 MAR 14 PM 1:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA