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18 NAR -8 PN 3-38

SECRETARY OF STATE

ALL AHASSEE FLORIDA

K. SALY MAR - 9 2018

## **COVER LETTER**

TO: Registration Section Division of Corporations							
SUBJECT: Pare Natural Nail Lounge LLC (Name of Limited Liability Company)							
The enclosed Articles of Dissolution and fee(s) are	e submitted for filing.						
Please return all correspondence concerning this m	natter to the following:						
Coy	Rentley (Name of Person)						
(Firm/Company)							
204 37 <sup>th</sup> Ave. N. # 364							
204 37th Ave. N. # 364  (Address)  St. Petersburg FL 33704  (City/State and Zip Code)							
For further information concerning this matter, ple	rase call:						
Coy Bentley (Name of Person)	at ( 727 ) 744 · 0034 (Area Code & Daytime Telephone Number)						
Enclosed is a check for the following amount:							
☑ \$25.00 Filing Fee and Certificate of Dissolution	on S55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)						
MAILING ADDRESS:	STREET/COURIER ADDRESS:						

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

SECRETARY OF STATE
FALL AMASSEE FLORIDA

1. The name of a limited li			0		TALL ALIASSEE
Pure Natu	ral Nail	Lounge	LLC	· · · · · · · · · · · · · · · · · · ·	
2. The Articles of Organiza	ation were filed o	<u> 5/15</u>	//3	and assig	gned
document number <u>L/</u>	30000715	30			
3. The delayed effective da (effective da (effective)	in this block does	not meet the app	licable statı	atory filing requirements	O/18 received for filing) s, this date will not be
4. A description of occurre 605.0707, Florida Statute	ence that resulted es, (copy 605.070	in the limited l 7 on back cove	liability con er letter).	mpany's dissolution p	oursuant to section
Busines	ss was	sold	on	01/10/18	
				,	
	,				
	, , , , , , , , , , , , , , , , , , ,				
5. If there are no members,	_		-	• • •	
activities and affairs:	<u>_ WI FI</u>	yr) Per	ice_		
		• • • • • • • • • • • • • • • • • • • •	<del></del>		
				•	
6. Signature of an authorized above to wind up the	ed person or if the company's activi	ere are no men ties and affairs	nbers, the s	ignature of the person	n appointed and
Cotten Pa	i 1ce		$\mathcal{C}$	ORtlyn Pence Printed Name	-
/ Signature	e			Printed Name	

FILING FEE: \$25.00