

L17000101176

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300267697183

01/22/15--01012--017 **25.00

15 JAN 22 PM 12:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB 03 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Perches 4 Parrots

DOCUMENT NUMBER: L13000101170

The enclosed **Notice of Limited Liability Company Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Leslie Gallagher

(Name of Contact Person)

(Firm/Company)

6587 Canal Rd

(Address)

Melbourne Village FL 32904

(City/State and Zip Code)

For further information concerning this matter, please call:

Leslie Gallagher

(Name of Contact Person)

at (321)

(Area Code)

914-4402

(Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

(Additional copy is enclosed)

☐ \$60 Filing Fee,
Certificate of Status &

Certified Copy

(Additional copy is enclosed)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment 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

Perches 4 Parrots

2. The Articles of Organization were filed on 7/15/2013 and assigned

document number L13000101170

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).

The business was never started.

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

Leslie Gallagher

6587 Canal Rd

Melbourne Village FL

32904

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:

Leslie Gallagher
Signature

Leslie Gallagher
Printed Name

FILING FEE: \$25.00

15 JAN 22 PM 12:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED