

L13000 121975

(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



800286550438

06/14/16--01036--004 \*\*25.00

2016 JUN 13 PM 1:20  
TALLAHASSEE, FLORIDA

2016 JUN 14 AM 7:35  
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Stephanie Gabriella, 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:

Stephanie Nunez

(Name of Person)

Stephanie Gabriella, LLC

(Firm/Company)

21399 Marina Cove Circle M13

(Address)

Aventura, FL 33180

(City/State and Zip Code)

For further information concerning this matter, please call:

Stephanie Nunez

(Name of Person)

at ( 863 ) 605-1104

(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

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

Stephanie Nunez

21399 Marina Cove Circle M13

Aventura, FL 33180

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:

Stephanie Nunez  
Signature

Stephanie Nunez

Printed Name

**FILING FEE: \$25.00**