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(Re	equestor's Name)	
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(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		





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SECRETARY OF STATE OF STATE OF CORP OF A 2: 47

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COVER LETTER

TO: Registration Section Division of Corporations			
SHBIE	ALTERATIONS BY LIA LLC		
SUBJECT: (Name of Limited Liability Company)			
The enc	closed Articles of Dissolution and fee(s) are submitted	for filing.	
Please r	return all correspondence concerning this matter to the	e following:	
	ROSALIA LOMBARDO		
	(Name	of Person)	
	(Firm/	Company)	
	3951 COCOPLUM CIRCLE UNI	TC	
	(Ac	ddress)	
	COCONUT CREEK, FL 33063		
	(City/State	and Zip Code)	
For furt	ther information concerning this matter, please call:		
	ROSALIA LOMBARDO	561 301-5338	
	(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed	d 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/COURIER ADDRESS:	
	Registration Section	Registration Section	
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
	Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is ALTERATIONS BY LIA LLC
2.	The Articles of Organization were filed on 09/26/2013 and assigned
	document number L13000136071
3.	The delayed effective date the dissolution if not effective on the date of filing: 03/31/2015 (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).
	ン ?
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: N/A
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs:
S	Signature ROSALIA LOMBARDO Printed Name

FILING FEE: \$25.00