

LI 300071642

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

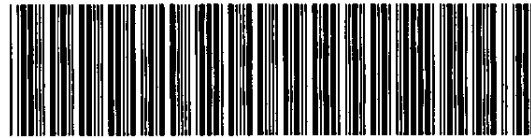
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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14 DEC 18 PM 12:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers DEC 23 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TACAZOLE, 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:

Charles Leliuga

(Name of Person)

Tacazole, LLC

(Firm/Company)

4447 Sherwood Forest Drive

(Address)

Titusville, FL, 32796

(City/State and Zip Code)

For further information concerning this matter, please call:

Charles Leliuga

(Name of Person)

321

at (

385-9817

(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

TACAZOLE, LLC

2. The Articles of Organization were filed on Dec 2013 and assigned

document number L13000171642

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).

There has been no active business conducted since organization date of original
filing.

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

4447 Sherwood Forest Drive

Titusville, FL, 32796

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:

Charles Leliuga
Signature

Charles Leliuga
Printed Name

FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA