

L17000 177548

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

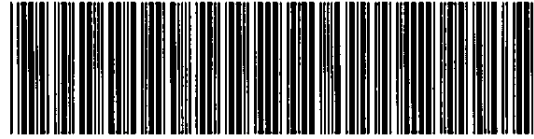
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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14 APR 14 01:00:18

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tiana Marie Bona 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:

Susan Bona
(Name of Person)

(Firm/Company)

403 Celebration Ave
(Address)

Celebration FL 34747
(City/State and Zip Code)

For further information concerning this matter, please call:

Susan Bona at (407) 702 3791
(Name of Person) (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
Jiana Marie Bona LLC
2. The Articles of Organization were filed on December²⁷ 2013 and assigned
document number L13000177548
3. The delayed effective date the dissolution if not effective on the date of filing: 2.1.14
(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).
NOT able to transfer a personal network marketing
business into an LLC as I thought

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs:
- | | | |
|-----------------------------|---------|------------------------|
| <u>Susan Bona</u> | FILED | 14 FEB 16 10 10 AM '14 |
| <u>403 celebration ave</u> | CLERK | |
| <u>Celebration Pl 34747</u> | FLORIDA | |

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:


Signature

Susan Bona
Printed Name

FILING FEE: \$25.00