

L14 000002966

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

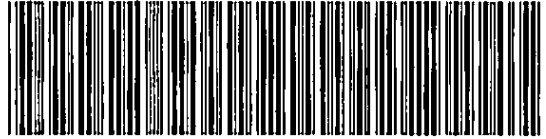
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SEP 12

Short Term

SEP 12 2021

ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cakery Creation LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Elizabeth Huber
Name of Person

Firm/Company

62 Barrington Dr.
Address

Palm Coast, FL 32137
City/State and Zip Code

Elizabeth.H.Huber@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elizabeth Huber at (386) 898-4693
Name of Person Area Code Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement of Termination:

FIRST: The name of the limited liability company is: Cahery Creation, LLC

SECOND: The Florida Document number of the limited liability company is: L140000002966

THIRD: The date of filing of the initial articles of organization is: Jan/07/2014

FOURTH: The date of filing of the dissolution is: May 20, 2021

FIFTH: This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.

Elizabeth Huber
Signature of Authorized Representative

Elizabeth Huber
Typed or printed name of signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

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FILED