

L14000021387

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

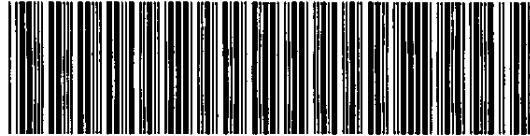
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/09/15--01019--002 **25.00

FILED
2015 APR -9 PM 12:12
FBI - MEMPHIS

APR 22 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Natural Essentials 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:

Erika Norman
(Name of Person)

Natural Essentials LLC
(Firm/Company)

221 Pine Ave
(Address)

Edgewater Fl. 32141
(City/State and Zip Code)

For further information concerning this matter, please call:

Erika Norman at (386) 1690-3476
(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

FILED

2015 APR -9 PM 12:12

1. The name of a limited liability company is

Natural Essentials LLC

2. The Articles of Organization were filed on 2-3-2014 and assigned

document number L14000021387

3. The delayed effective date the dissolution is 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).

Wasn't able to get the company
up & running. Financial issues.

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

Erika Noeman

221 Pine Ave

Edgewater Fl. 32141

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:

Erika Noeman

Signature

Erika Noeman

Printed Name

FILING FEE: \$25.00