# 114000091755

(Re	questor's Name)				
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
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(Document Number)					
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#### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT

### Cheryl Ann's Handmade Soap

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

# Cheryl Parker

(Name of Person)

## Cheryl Ann's Handmade Soap

(Firm/Company)

10580 Aucilla River Rd.

(Address)

Lamont, FL 32336

(City/State and Zip Code)

For further information concerning this matter, please call:

#### Cheryl Parker

\_,,850

223-1643

(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  Cheryl Ann's Handmade Soap, LLC						
2.	The Articles of Organization	on were filed on June 9, 2	014	_ and assigned			
	document number L140000	91755	_				
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)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not a listed as the document's effective date on the Department of State's records.						
4.	A description of occurrence 605.0707, Florida Statutes,	e that resulted in the limi (copy 605.0707 on back	ted liability company's d	issolution pursuant to section			
	Company not making money.	`	,				
				De d Cri			
				HA CG 888 - SS			
	If there are no members, enactivities and affairs:	iter the name and address Cheryl Parker	s of the person appointed	to wind up the company's			
		10580 Aucilla River Rd		ω ω			
	•	Lamont, FL 32336					
6. list	Signature of an authorized ted above to wind up the co	person or if there are no mpany's activities and af	members, the signature of	f the person appointed and			
(	Cheryl Park	<u> </u>	Cheryl Parker				
	X Signature		Printec	Name			

FILING FEE: \$25.00