L14000128878

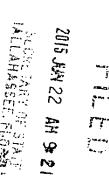
| (Re | questor's Name) | |
|-------------------------|----------------------|-----------|
| (Ad | dress) | <u>.</u> |
| (Ad | dress) | |
| (Cit | ty/State/Zip/Phone # | f) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | isiness Entity Name | e) |
| (Document Number) | | |
| Certified Copies | _ Certificates o | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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JUN 23 2015

Y SULKER

COVER LETTER

TO:

Registration Section Division of Corporations

| SUBJECT: FINE TOOTH COMB CHOWING | | | | |
|--|---|--|--|--|
| (Name of Limited I | Liability Company) | | | |
| | | | | |
| The enclosed Articles of Dissolution and fee(s) are submitted | for filing. | | | |
| Please return all correspondence concerning this matter to the | following: | | | |
| | | | | |
| Taiwana Burchete | Johnson | | | |
| (Name o | f Person) | | | |
| | | | | |
| 1941Washingt-Birdy-Constrainty-2ct #3\$ | | | | |
| all discontinue | ન | | | |
| Hollywood Fl 338 | Hess. | | | |
| Mentobaucherlate AL 300W | | | | |
| (City/State and Zip Code) | | | | |
| For further information concerning this matter, please call: | | | | |
| | | | | |
| laiwana 5 Johnson | at (954), 860-9488 | | | |
| (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: | STREET/COURIER ADDRESS: | | | |
| Registration Section | Registration Section | | | |

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. | The name of a limited liability company is |
|------------|--|
| | Fine Tooth Comb Cleaning |
| 2. | The Articles of Organization were filed on 8-18-14 and assigned |
| | document number <u>L14000128878</u> 8-25-14 |
| 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 be listed as the document's effective date on the Department of State's records. |
| 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). Company is Not physically in effect. |
| - | |
| | |
| | |
| 5. | If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: TOWNON BUCKET TOWNON TOWNON BUCKET TOWN B |
| 6. list | Signature of an authorized person or if there are no members, the signature of the person appointed and led above to wind up the company's activities and affairs: |
| | the above to time up the company of activities and arrains. |
| 70 | Signature Taiwana B Johnson Printed Name |

FILING FEE: \$25.00