

L14000141303

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

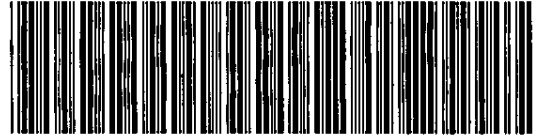
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2014 OCT 27 AM 11:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 29 2014
J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EVOLUTIONARY ELEMENTS 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:

MICHAEL LAZARO / CHRISTINA LAZARO
(Name of Person)

EVOLUTIONARY ELEMENTS LLC
(Firm/Company)

24023 MADACA LANE #208
(Address)

PORT CHARLOTTE, FL. 33934
(City/State and Zip Code)

For further information concerning this matter, please call:

MICHAEL LAZARO at (843) 384-6790
(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

CLERK OF STATE
TALLAHASSEE, FLORIDA

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**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

EVOLUTIONARY ELEMENTS LLC

2. The Articles of Organization were filed on 9-3-14 and assigned

document number L14000141303

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)

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).

UNABLE TO START COMPANY DUE TO FINANCIAL
CONSTRAINTS. COMPANY NEVER GOT STARTED.

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

MICHAEL LAZARO OF CHRISTINA LAZARO

24023 MADACA LANE

#208

PORT CHARLOTTE, FL. 33952

6. Signature of an authorized person or if there are no members, the signature of the person appointed listed above to wind up the company's activities and affairs:


Signature

Michael LAZARO
Printed Name

FILING FEE: \$25.00

CLERK OF STATE
TALLAHASSEE, FLORIDA

2014 OCT 27 AM 11:55

FILED