

L14000 145215

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

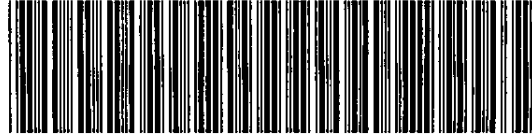
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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16 NOV - 7 AM 10:34

FILING  
CLERK  
STATE  
OF  
MISSISSIPPI

07/06/16--01019--031 \*\*25.00

NOV 08 2015  
J. HARRIS

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: \_\_\_\_\_

Whole Gift Baskets 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:

Suzanne Puszdori

(Name of Person)

(Firm/Company)

3912 S. Ocean Blvd Apt #808

(Address)

Highland Beach FL 33487

(City/State and Zip Code)

For further information concerning this matter, please call:

Suzanne Puszdori

(Name of Person)

at ( 954 ) 325 1182

(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 17, 2016

ZSUZSA PUSZTAI  
3912 S OCEAN BLVD APT 808  
HIGHLAND BCH, FL 33487

SUBJECT: WHOLE GIFT BASKETS, LLC  
Ref. Number: L14000145215

RECEIVED  
2016 NOV -7 PM 4:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for WHOLE GIFT BASKETS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The Notice of Dissolution must contain a description of information that should be included in a written claim.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 116A00014331

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
16 NOV -7 AM 10:34



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 16, 2016

ZSUZSA PUSZTAI  
3912 S OCEAN BLVD APT 808  
HIGHLAND BCH, FL 33487

SUBJECT: WHOLE GIFT BASKETS, LLC  
Ref. Number: L14000145215

We have received your document for WHOLE GIFT BASKETS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707(1)(c), Florida Statutes, must be contained in the document.

The Notice of Dissolution must contain a description of information that should be included in a written claim.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 116A00014331

2017 OCT 14 PM 2:18

FILED  
16 NOV -7 AM 10:34



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 5, 2016

ZSUZSA PUSZTAI \*\*\*2ND MAILING\*\*\*  
3912 S OCEAN BLVD APT 808  
HIGHLAND BCH, FL 33487

SUBJECT: WHOLE GIFT BASKETS, LLC  
Ref. Number: L14000145215

2016 SEP 12 PM 4:21

We have received your document for WHOLE GIFT BASKETS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A Statement of Termination may be filed after the limited liability company has completed winding up and after a voluntary dissolution has been filed with this office. See section 605.0709(7), Florida Statutes for reference.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

245 6052

Jenna D Harris  
Regulatory Specialist II

Letter Number: 116A00014331

FILED  
2016 NOV -7 AM 10:34

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

1. The name of a limited liability company is

WHOLE GIFT BASKETS LLC

2. The Articles of Organization were filed on 9/12/2014 and assigned

document number L14000145215

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.

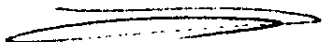
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

The company showed loss every month.  
No sales were coming in, so it became just an expense.  
I had no time to market it, so had to quit it.

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

Zsuzsa Pusztai  
3912 S Ocean Blvd Apt 808  
Highland Bch, FL 33487

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:



Signature

ZSUZSA PUSZTAI

Printed Name

**FILING FEE: \$25.00**

FILED  
STATE OF FLORIDA  
16 NOV - 7 AM 10:34