

L14000146892

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

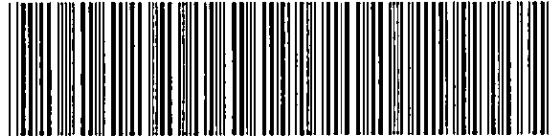
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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FILED

2020 JAN -9 AM 9:55

SECRET

Y SUI KER

2020 JAN 10

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 127667 8188264

AUTHORIZATION :

COST LIMIT : \$25.00



ORDER DATE : January 9, 2020

ORDER TIME : 1:58 PM

ORDER NO. : 127667-005

CUSTOMER NO: 8188264

DOMESTIC FILINGS

NAME: THE STORY NEST LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson - EXT# 62980

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Story Nest 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 Lucas

(Name of Person)

Imagina Content, LLC

(Firm/Company)

7291 NW 74th Street

(Address)

Miami, Florida 33166

(City/State and Zip Code)

For further information concerning this matter, please call:

Erika Lucas

(Name of Person)

305

357-6000

at (_____) _____

(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

1. The name of a limited liability company is

The Story Nest LLC

2. The Articles of Organization were filed on 09/18/2014 and assigned

document number L14000146892

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)

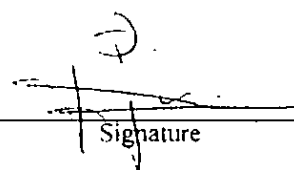
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

Consent of its member

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

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

Irantzu Diez Gamboa

Printed Name

FILING FEE: \$25.00

FILED

2020 JAN -9 AM 5:35
STATE OF FLORIDA
DEPARTMENT OF STATE

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: The Story Nest LLC

Document number of Limited Liability Company is: L14000146892

Date of dissolution was: January 8, 2020

Description of information that must be included in a written claim:

A claim should include the amount allegedly owed, the facts of, or basis for, the claim, the date on which the claim accrued, whether the claim is secured, unsecured, and/or contingent, and copies of any invoices, contracts, purchase orders, instruments of indebtedness and any other information in your possession on which a claim is based.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

7291 NW 74th Street

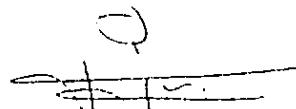
Miami, FL 33166

Attn: President

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Irantzu Diez Gamboa

Printed Name of the Person Filing


Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00