# 114000167983

| (Red                                    | questor's Name)   |           |
|---|-------------------|-----------|
| (Add                                    | dress)            |           |
| (Add                                    | dress)            |           |
| (City/State/Zip/Phone #)                |                   |           |
| PICK-UP                                 | ☐ WAIT            | MAIL      |
| (Bus                                    | siness Entity Nan | ne)       |
| (Document Number)                       |                   |           |
| Certified Copies                        | _ Certificates    | of Status |
| Special Instructions to Filing Officer: |                   |           |
|   |                   |           |
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March 18

### **COVER LETTER**

TO:

Registration Section Division of Corporations

# LIBERACION ALL IN CARPETS LLC

SUBJECT: (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:

| MARIA CALLES                  |  |  |  |
|-------------------------------|--|--|--|
| (Name of Person)              |  |  |  |
| LIBERACION ALL IN CARPETS LLC |  |  |  |
| (Firm/Company)                |  |  |  |
| 406 KARPPE RD                 |  |  |  |
| (Address)                     |  |  |  |
| PLANT CITY, FL 33567          |  |  |  |
| (City/State and Zip Code)     |  |  |  |

For further information concerning this matter, please call:

| MARIA CALLES     | 813                                    | ,7319014 |
|------------------|--|----------|
| (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

| l.        | 1. The name of a limited liability company is   |   |  |  |
|-----------|---|---|--|--|
|           | LIBERACION ALL IN CARPETS   |   |  |  |
| 2.        | 2. The Articles of Organization were filed on 10/28   | and assigned  |  |  |
|           | document number L14000167983  |   |  |  |
| 3.        | (effective date cannot be prior to o  | e the dissolution if not effective on the date of filing:  over date cannot be prior to or more than 90 days later than date document is received for filing) at this block does not meet the applicable statutory filing requirements, this date will not be excive date on the Department of State's records. |  |  |
| 4.        | 4. A description of occurrence that resulted in the 605.0707, Florida Statutes, (copy 605.0707 on based on the following statutes). | limited liability company's dissolution pursuant to section ack cover letter).  |  |  |
|           | NOT MORE IN BUSINESS  |   |  |  |
|           |   |   |  |  |
| 5.        | 5. If there are no members, enter the name and add  | ress of the person appointed to wind up the company's   |  |  |
|           | activities and affairs:   | <u></u>   |  |  |
|           |   | 5 · · · · · · · · · · · · · · · · · · ·   |  |  |
|           |   | W   |  |  |
|           |   | 7   |  |  |
|           |   |   |  |  |
| 6.<br>lis | 6. Signature of an authorized person or if there are listed above to wind up the company's activities an                            | no members, the signature of the person appointed and d affairs:  |  |  |
|           |   |   |  |  |
|           | May   | MARIA CALLES  |  |  |
| _         | Signature   | Printed Name  |  |  |

FILING FEE: \$25.00