L14000171100

(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



800304143308



K. SALY OCT -4 2017 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

Phone: 8	350-558	-1500		
		ACCOUNT NO.	:	I2000000195
		REFERENCE	:	845480 7356589
		AUTHORIZATION	:	Com Bener
		COST LIMIT	:	\$ 25.00
ORDER DA	ATE :	October 3, 2017		
ORDER TI	IME :	1:14 PM		
ORDER NO	o. :	845480-005		
CUSTOMER	R NO:	7356589		
		DOMESTIC F	ILIN	NGS
N	NAME :	PARADIES-TPA	2014	4 (F&B), 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: Melissa Zender - EXT#
EXAMINER'S INITIALS:

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

PARADIES-TPA 2014 (F&B), 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:

(Name of Person) THE PARADIES SHOPS, LLC (Firm/Company) 2849 PACES FERRY ROAD, OVERLOOK 1, SUITE 400 (Address) ATLANTA, GEORGIA 30339 (City/State and Zip Code)

For further information concerning this matter, please call:

KAREN SUTTLE at (404 344-7905 (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

	ARTICLES OF DISSOLUTION	٠.,			
	FOR A LIMITED LIABILITY COMPANY	2017 OCT -3 AM TAIL AHASSIT OF			
. The name of a limited lial	bility company is	AH.			
PARADIES-TPA 2014 (F&		PALLAHARAMI SE			
The Articles of Organizat	ion were filed on NOVEMBER 3, 2014	and assigned			
document number L14000	0171100				
(effect Note: If the date inserted i	e the dissolution if not effective on the date of filiative date cannot be prior to or more than 90 days later than date in this block does not meet the applicable statutory filing fective date on the Department of State's records.	e document is received for filing)			
. A description of occurren 605.0707, Florida Statutes	ice that resulted in the limited liability company's s, (copy 605.0707 on back cover letter).	dissolution pursuant to secti			
THIS COMPANY HAS NO	OT CONDUCTED ANY BUSINESS.				
. If there are no members, activities and affairs:	enter the name and address of the person appointed KAREN SUTTLE	d to wind up the company's			
	2849 PACES FERRY ROAD				
	OVERLOOK I, SUITE 400				
	ATLANTA, GEORGIA 30339				
. Signature of an authorize isted above to wind up the c	d person or if there are no members, the signature company's activities and affairs:	of the person appointed and			
Have & 1	KAREN K. SUTTLE				
Signature	unite	ed Name			

FILING FEE: \$25.00