

L14000191064

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2015 DEC 28 AM 9:19

FILED

12/28/15--01024--002 \*\*25.00

K. SALLY  
EXAMINER  
DEC 30 2015

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Moore Flooring & Design, 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:

Laurie E. Moore-Clark

(Name of Person)

Moore Flooring & Design, LLC

(Firm/Company)

9180 SE 108th Place

(Address)

Bellevue, FL 34420

(City/State and Zip Code)

For further information concerning this matter, please call:

Laurie E. Moore-Clark

352

454-1810

at ( )

(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**

**FILED**  
2015 DEC 28 AM 9:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is  
Moore Flooring & Design, LLC

2. The Articles of Organization were filed on 12/16/2014 and assigned  
document number L14000191064

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).  
State of Florida Administratively Dissolution for Annual Report on 9/25/2015. There hasn't been any income nor  
has there been any business conducted under this name. My installer obtained employment with another local  
floor installation company, who was able to provide him with a steady income. This occurred shortly after the  
business was formed. I don't want to carry the expenses/burdens of a company that has no income generation.

5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: Laurie E. Moore-Clark, AMBR  
9180 SE 108th Place  
Belleview, FL 34420  
lclark6029@aol.com

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:

Laurie E. Moore-Clark  
Signature

Laurie E. Moore-Clark

Printed Name

**FILING FEE: \$25.00**