LISecce 69964

(Requestor's Name)				
(Address)	300286282013			
(Address)	33323232313			
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)	05/27/1601008086 **25.80			
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:	16 May 27			
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COVER LETTER

TO: Registration Section
Division of Corporations

Vixen Academy, 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:

Barbie Lazaro	
(Name of Person)	
Vixen Academy, LLC	
(Firm/Company)	
1521 Alton Rd., #150	
(Address)	
Miami Beach, Fl 33139	
(City/State and Zip Code)	

For further information concerning this matter, please call:

Barbie Lazaro

_{...}305 _ 775

(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

1.	The name of a limited liabili Vixen Academy	ty company is						
2.	The Articles of Organization	were filed on $\frac{4/21\ 20}{}$	15	_ and assign	ned			
	document number L150000	69964						
3.	The delayed effective date the (effective of Note: If the date inserted in the listed as the document's effect.	ne dissolution if not eff date cannot be prior to or m his block does not meet the	ne applicable statutory filing i	5: 5/1/2015 document is re requirements,	ceived for this date	filing) will not b		
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).							
	Owner chose to explore a different	ent path.			·			
		· · · · · · · · · · · · · · · · · · ·						
					22	<u>1</u>		
5.	If there are no members, enter the name and address of the person appointed to wind up the company							
	activities and affairs:	Barbie Lazaro 1521 Al	ton Rd., # 150 Miami, Beach	, FL 33139	3,33	<u> </u>		
						7 AM		
						7: 1		
					3.5	_		
6. lis	Signature of an authorized p sted above to wind up the con	erson or if there are no apany's activities and a	o members, the signature o affairs: Barbie Lazaro	f the person	appointe	ed and		
1	Signature	- GOVE		l Name				
سا								

FILING FEE: \$25.00