

h15 000126752

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

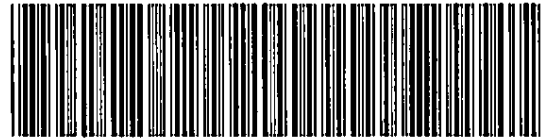
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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08/16/21--01047--002 \*\*25.00

2021 SEP -7 AM 8:02  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 27, 2021

RECEIVED

BARBARA GOODMAN  
2039 PICCADILLY CIRCUS  
NAPLES, FL 34112

28 SEP -7 AM 11:58

SUBJECT: BARBARA A. BARATH LLC  
Ref. Number: L15000126752

We have received your document for BARBARA A. BARATH LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document was received with pages missing, If you are trying to dissolve the LLC, enclosed is the articles of dissolution.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Catherine M Brumbley  
Regulatory Specialist II

Letter Number: 121A00020709

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Dissolution of LLC

**DOCUMENT NUMBER:** L15000126752

The enclosed **Notice of Limited Liability Company Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

BARBARA A GOODMAN

(Name of Contact Person)

BARBARA A BARATH LLC

(Firm/Company)

2039 PICCADILLY CIRCUS

(Address)

NAPLES FL 34112

(City/State and Zip Code)

For further information concerning this matter, please call:

LEONARD C GOODMAN

(Name of Contact Person)

at (<sup>954</sup> )  
(Area Code)

371-3533

(Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &  
Certificate of Status

☐ \$55 Filing Fee &  
Certified Copy  
(Additional copy is enclosed)

☐ \$60 Filing Fee,  
Certificate of Status & 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

BARBARA A BARATH LLC

2. The Articles of Organization were filed on JULY 23, 2015 and assigned

document number L15000126752

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).

THE LLC HAS DECIDED TO DISCONTINUE OPERATIONS AS A STAND ALONE LLC.

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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:

Barbara A. Goodman  
Signature

BARBARA A GOODMAN  
Printed Name

**FILING FEE: \$25.00**

**FILED**  
2021 SEP -7 AM 8:02  
SECRETARY OF STATE  
TALLAHASSEE, FL