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S. WARREN JUN 2 0 2017

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: PICASSO Kitchen BAth
(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:
Dina Blair
(Name of Person)
(Firm/Company)
718 E. Venico ano
(Address)
Flort Venice, Fl 34293
(City/State and Zip Code)
For further information concerning this matter, please call: PS DESIGNS of Fice 941, 786-1399
NINA BIAIR at (941   815 - 4165 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a perfect for the following amount:
S25.00 Filing Fee and Certificate of Dissolution   \$\Begin{align*} \Pi \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

#### 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

Certified Copy (additional copy is enclosed)

# ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liabi	lity company is
Picass Kitcher	n & KAth
2. The Articles of Organization	on were filed on $1000000000000000000000000000000000000$
document number <u>L15</u> (	000161105
effective (effective) (effecti	the dissolution if not effective on the date of filing: 2-20-to- e date cannot be prior to or more than 90 days later than date document is received for filing) this block does not meet the applicable statutory filing requirements, this date will not be etive date on the Department of State's records.
4. A description of occurrence 605.0707, Florida Statutes,	e that resulted in the limited liability company's dissolution pursuant to section (copy 605.0707 on back cover letter).
and my	geye to eye with the business Equipment the business is no
5. If there are no members, er	iter the name and address of the person appointed to wind up the company's
activities and affairs:	Roman Cordinale
	3420 Bal Harbor Bliva
	Punta Gurda, FC-39 33950
6. Signature of an authorized listed above to wind up the co	person or if there are no members, the signature of the person appointed and mpany's activities and affairs:
Min M. Bal	Mittle M. Blav
Signature	Printed Name

FILING FEE: \$25.00