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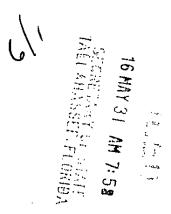
. (Re	equestor's Name)	
- (Ac	ldress)	
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JUN 02 2016 J SHIVERS

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Sweet Pieces LLC (Name of Limited Liability Company)		
(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:		
Susan Willy		
(Name of Person)		
(Firm/Company)		
12- Lact Va Da		
FenSacola, FL 32507 (City/State and Zip Code)		
D = 1 F1 22 C07		
tensacola, the 32501		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
_		
Susan Willy at (228) 327.2605 (Name of Person) (Area Code & Daytime Telephone Number)		
(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: STREET/COURIER ADDRESS:		
Registration Section Registration Section Division of Corporations Division of Corporations		
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building		

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability con	npany is
Sweet Pieces	ile.
2. The Articles of Organization were document number \$\mu \begin{align*} \lambda 0000 \text{ document number} \text{ \lambda 0000} \text{ \text{ document number}} \text{ \text{ \lambda 0000}} \text{ \text{ document number}} \text{ \text{ \text{ document number}}} \	filed on $01-04-2016$ and assigned
3. The delayed effective date the diss (effective date can Note: If the date inserted in this block)	olution if not effective on the date of filing: 06-01-2016 anot be prior to or more than 90 days later than date document is received for filing) at does not meet the applicable statutory filing requirements, this date will not be on the Department of State's records.
4. A description of occurrence that re 605.0707, Florida Statutes, (copy 6	sulted in the limited liability company's dissolution pursuant to section 05.0707 on back cover letter). ALL TO LACK OF SALES
5. If there are no members, enter the activities and affairs:	name and address of the person appointed to wind up the company's
	3
6. Signature of an authorized person clisted above to wind up the company's	or if there are no members, the signature of the person appointed and sactivities and affairs:
Swam Willy Signature	Susan WILEY Printed Name

FILING FEE: \$25.00