

L16000002/75

(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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06/05/19--01014--015 **25.1

effective 9-30-19

19 JUL -5 PM 1:21
DIVISION OF STATE
CORPORATION

LLC
Voldis.
7/8/19
DC

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

Plasma Candy, 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:

Jason Lexell

(Name of Person)

DH MEDIA, LLC

(Firm/Company)

401 East Jackson Street, Suite:

(Address)

Tampa FL 33602

(City/State and Zip Code)

For further information concerning this matter, please call:

Jason Lexell

(Name of Person)

at (813) 727-6007

(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

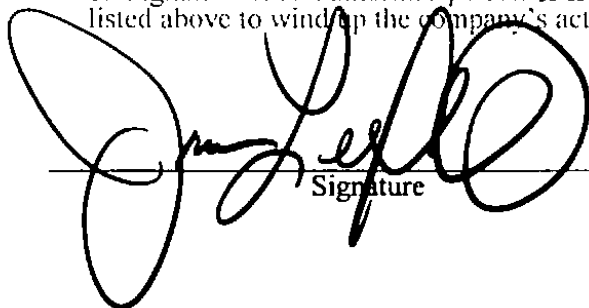
1. The name of a limited liability company is Plasma Candy, LLC
2. The Articles of Organization were filed on January 4, 2016 and assigned
document number L16000002175 ✓
3. The delayed effective date the dissolution if not effective on the date of filing: September 30,
(effective date cannot be prior 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 primary business function is
no longer profitable.

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs:

Jason Lexell
401 East Jackson Street
Suite 3300
Tampa, FL 33602

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:


Signature

Jason Lexell
Printed Name

FILING FEE: \$25.00

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DIVISION OF CORPORATE
STATE